



2013 Community Health Assessment

Carteret County Health Department

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***"Assessing the Community,
Planning for a Healthier Tomorrow"***

Acknowledgements

The 2013 Community Health Assessment report was prepared by the Carteret County Community Assessment Planning Team. Thank you to our stakeholders- individuals and other agencies in the community- for your guidance, support, and input throughout this process.

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Acknowledgements

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Cover photo credit: Andrea Swain, North River Bridge (Down East Carteret County)

*Artwork presented within this report was printed with parental permission
as part of the 2013 CHA Children's Art Contest.*

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Overview of Purpose and Process

A Community Health Assessment (CHA) is a process by which community members gain an understanding of the health concerns and health-care systems of the community by identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources, and needs. Assessing the community's needs is one of the core functions of Public Health to ensure that we are providing care and services that are needed by the community.

The 2013 Carteret County Community Health Assessment was a collaborative effort between Carteret General Hospital, Carteret County Health Department, and many community partners and volunteers.

This report will serve as an update to the 2009 Community Health Assessment, providing trend data on key health issues, guiding the work of community groups, coalitions, and organizations to improve the health and quality of life in Carteret County.

Summary of Demographics, Trends, and Select Findings

- The population in Carteret County has steadily increased by 13.9% since 2000.
- Carteret County is racially composed of 89.9% White, 6.3% Black, and 3.8% Hispanic.
- The Hispanic population has increased since 2008 from 2.3% to 3.8% of the population.
- The two largest demographic population groups in the county are 0-19 years old (21%) and 60+ (27%).
- The median age in Carteret County is 45.8 years old and the median household income in Carteret is \$47,403.
- Overall poverty rate in Carteret County is 13.1% from (2007-2011), a slight increase from 12.2% (2006-2010). Several areas in the county have "pockets" of much higher poverty rates, ranging from 14% in the western part of Carteret County to 55% in the eastern part of the county.
- Approximately 17.1% of the households in Carteret County were food insecure.
- Unemployment rate in Carteret County averaged 8.6% in 2012.
- Major industry in the county includes Tourism, Marine Trades, and Commercial and Recreational Fishing.
- Carteret County maintains the "Tier 3 Designation," as one of the least economically disadvantaged counties in North Carolina.
- Carteret County's High School Graduation Rate was 84.7 compared to the state rate of 82.5.

Leading Causes of Death Ages Carteret County 2007-2011 (Age Adjusted Death Rates)

	Carteret	NC
1. **Cancer (all sites)	196.8	179.7
2. **Heart Disease	198.9	179.3
3. Stroke (Cerebrovascular Disease)	43.6	46.0
4. Chronic Lower Respiratory Disease	39.3	46.6
5. **All Other Unintentional Injuries	38.6	29.2
6. Alzheimer's Disease	25.7	29.0
7. Diabetes	17.2	22.0
8. **Suicide	17.9	12.1
9. Motor Vehicle Injuries	17.0	15.5
10. Septicemia	12.2	13.6
11. **Chronic Liver Disease & Cirrhosis	12.0	9.3

**Indicates Carteret's age-adjusted death rates are significantly higher than the state's age adjusted death rate for that cause of death.

Health Indicators

- Chronic Diseases such as Heart Disease, Cancer and Stroke remain the top three leading causes of death in Carteret County.
- Youth Substance Abuse has increased since 2008: Past 30 day use for Alcohol 28.9%, Marijuana 19.8%, Cigarettes 17.8%, and Prescription Drug 7.7%, according to 2013 Pride Survey results of 8th, 10th, and 12th graders.
- The percentage of adults aged 18-64 years that have any type of health insurance coverage in Carteret County has decreased from 76.8% in 2010 to 71.9% in 2012.
- Maternal smoking rate was 18.2 in Carteret County, and continues to be significantly higher than the state average of 10.9 per 1,000 live births
- Lung cancer and breast cancer were the leading causes of cancer deaths in Carteret County.
- Suicide death rate appears to be increasing from 15.7 (2006-2010) to 17.9 (2007-2011) per 100,000 population.
- Carteret County's maternal health indicators are lower than the state's rates for Low Birth Weight and Very Low Birth Weight, Teen Pregnancy, as well as Infant Death.
- According to 2012 Behavioral Risk Factor Surveillance System data, 67.3% of the population self-reported as overweight or obese.
- Carteret County remains one of the top ten counties in NC for highest number of unintentional poisonings and overdoses due to prescription drugs.

Community Input

Two surveys were utilized to gather community input for the 2013 CHA, a Key Informant Survey and a Community Opinion Survey. The Key Informant Survey, a simple 10 question survey, was sent electronically to 500 individuals in the faith community, business community, local government, and the medical community. From the 500 surveys distributed, 134 were completed, giving a completion rate of 26.8.

Several months later, a much larger Community Opinion Survey with 78 questions, was distributed in the community. Individual responses were collected via paper surveys as well as electronically. A convenience sampling method was used therefore; results are not generalized for the entire county.

A total of 549 community opinion surveys were completed. The Community Opinion Survey covered multiple categories of health and community life including but not limited to: parks and recreation, personal health, health behavior, quality of life, emergency preparedness, and mental health. Both surveys asked participants to rank major health, environmental, and mental health issues in our community. Additional questions were asked regarding access to care, access and availability to community services, and overall community issues. In most cases, both the surveys resulted in the same top issues. The following pages provide a brief overview of community input collected. For complete results see [Appendix B](#) in the 2013 CHA.

Key Informant Survey and Community Opinion Survey Data for Carteret County

“Health issues which are a major problem...”

- Overweight and Obesity
- High Blood Pressure
- Diabetes
- Heart Disease
- Cancer

“Mental Health/Substance Abuse issues which are a major problem...”

- Adult Prescription Drug Abuse
- Illegal Drug Use
- Alcohol Abuse
- Youth Prescription Drug Abuse
- Youth Illegal Drug Use
- Tobacco Use

Community Input Continued

“Environmental issues which are a major problem...”

- Mold
- Pest Control (Mosquitos, bed bugs)
- Littering
- Recycling opportunities
- Water Pollution
- Animal control/ stray animals

“Services or programs which you feel are ”Extremely Difficult” to find or use, or are “Non Existent” in Carteret County...”

- Access to Mental Health Care
- Access to Drug/Alcohol Treatment
- Public Transportation
- Recreation Activities for Youth/Teens/Families
- Affordable Housing

“Our community needs to do more to address...”

- Substance Abuse (Prescription Drugs, Alcohol, and Illegal Drugs)
- Access to Mental Health Services
- Obesity/ Overweight
- Increase Job Opportunities
- Increase Economic Development/ Smart Growth
- Tobacco Use/ Reduce Exposure to Secondhand-smoke

Priority Areas Identified by the 2013 CHA Planning Team

From this assessment, the following were identified as priority areas and recommended to receive further attention within the Community Action Planning Process.

- **Chronic Disease:** Obesity, Cancer, Heart Disease
- **Substance Abuse/Mental Health:** Access to Services, Adult Prescription Drug Abuse and Youth Alcohol and Illicit Drug Abuse
- **Economic Development:** Job Opportunities, Public Transportation, and Affordable Housing

Carteret General Hospital also conducted a Community Health Assessment in 2013. An electronic version of this report is available on their website www.carteretgeneral.com. Carteret General selected the following as priority issues and developed an action plan to address each of the areas:

- Diabetes
- Cancer
- Cardiovascular Disease
- Unintentional Poisonings & Injuries

Next Steps

Additional community meetings will be held in 2014 to discuss and develop a Community Action Plan to address the priority areas identified. For more information or to learn how to become involved, contact the Carteret County Health Department, (252) 728-8550.

Projects and Initiatives from the 2009 Community Health Assessment

Since 2010, work has continued on the priority areas listed below. New local taskforces and coalitions were established, and others were continued through the Healthy Carolinians Partnership in Carteret County. Below are a few examples of the work and types of projects which have been initiated and/or accomplished.

1. Access to care:

- School Based Health Center Project, Down East: Abandoned-due to lack of funding. (2011)
- Federally Qualified Health Center Project: Project placed on hold. (2012)

2. Substance Abuse:

- Substance Abuse Prevention Taskforce; Contact the Carteret County Sheriff's Office (252) 504-4800 for more information.
 - ✓ Focuses on Prescription Drug Abuse Prevention & Education
 - ✓ Provided support for medication disposal events (biannually)
 - ✓ Promoted trainings for prescribers and medical providers
 - ✓ Conducted trainings for parents and caretakers in the community
 - ✓ Participation in regional substance abuse prevention coalition (CCSAP)
 - ✓ Recipient of NC Prevent Underage Drinking Funds
 - ✓ Recipient of Project Lazarus funding
 - ✓ Implemented M.E.D.S. campaign on medication safety, (Monitor, Educate, Dispose, and Secure)

3. Physical Inactivity/Obesity:

- Shape Carteret Committee; Contact the Carteret County Partnership for Children (252) 727-0440 for more information.
 - ✓ Focuses on childhood obesity, community awareness on healthy eating and active living, and policy and environmental change for child care facilities encouraging healthy eating policies and opportunities to increase physical activity.
 - ✓ Shape NC Grant Recipient
- Parks and Recreation
 - ✓ Updated Walking Trail Guide and Park Guide.
 - ✓ Recipient of Community Transformation Grant Funding to purchase supplies and sporting equipment for recreation facility with joint use agreement with the schools.
 - ✓ For a list of current recreational offerings, programming, and facilities, visit CC Parks and Recreation, www.ccparksrec.com

4. Tobacco Use:

- Carteret County Health Department
 - ✓ Coordinated Tobacco Cessation provider training for OBGYN and women's' health providers.
 - ✓ Recipient of March of Dimes Community Chapter Funds to purchase educational materials on tobacco and other drug use during pregnancy.
 - ✓ Coordinated tobacco advocacy training for students' at all three high schools.
 - ✓ Coordinated Kick Butts Day and Great American Smoke out activities with local high school students.
 - ✓ Tobacco Free Parks Policy passed in 2012 for all Carteret County Parks and Recreation Grounds and Facilities.
 - ✓ Recipient of Community Transformation Grant Funding to purchase billboards, signage, and tobacco urns promoting the policy change for Tobacco Free Parks.

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CHAPTER 1: INTRODUCTION

The Carteret County Health Department is pleased to present the 2013 Community Health Assessment. The State of North Carolina requires local health departments to submit a Community Health Assessment document every four years as part of the Local Public Health Accreditation Program.

What is a Community Health Assessment?

A Community Health Assessment (CHA) is a process by which community members gain an understanding of the health concerns and health-care systems of the community by identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources, and needs. This is accomplished by compiling and analyzing data from community members (primary sources), as well as from other sources such as the State Center for Health Statistics, Centers for Disease Control and Prevention, and other research databases (secondary sources).

Information contained in this report is vitally important to local government agencies, non-profit organizations, local businesses, the medical community, Economic Development, Tourism Authority and even schools. Assessing the community enables us to identify and validate issues within our community by shedding light on strengths, as well as opportunities for improvement within the county.

It is our hope that this report accurately represents the county's strengths and needs. Our goal -- along with other communities in North Carolina -- is to create systems and environments that promote healthy lifestyles for all North Carolinians as we strive to make North Carolina the healthiest state in the country.

Methodology

Two surveys were utilized to gather community input in 2013. A Key Informant Survey was sent electronically in March of 2013 to 500 individuals in the faith community, business community, local government, and the medical community, and out of 500 surveys, 134 were completed. Not long after the distribution of the Key Informant Survey, a Community Opinion Survey was distributed in May of 2013. Individual responses were collected via paper surveys as well as electronically. A convenience sampling of 549 community opinion surveys were gathered. The Community Opinion Survey, which was a more comprehensive survey, covered multiple categories of health and community life including; parks and recreation, personal health, health behavior, quality of life, emergency preparedness, mental health and many more. The Key Informant Survey was a brief 10 question survey; however, both surveys asked participants to rank major health, environmental, and mental health issues in our community. Additional questions were asked regarding access to care, access and availability to community services, and overall

community issues. In most cases, both the surveys resulted in the same top issues. For a more comprehensive description of Community Input, see [Chapter 7](#).

The Community Opinion Survey was advertised in the local newspaper, and on the Health Department and Carteret General Hospital's Facebook pages and websites. Links to the survey were also distributed to all county government employees, as well as hospital employees.

Paper surveys were also distributed at the health department, libraries, free clinics, health fairs, and to the jury pool. Working with the Clerk of Court in Carteret County, during the month of May, the planning team was able to distribute surveys to individuals selected for jury duty.

In addition to community input, secondary data was gathered, reviewed and interpreted from dozens of sources, including the 2010 Census and American Community Survey Reports, the Centers for Disease Control and Prevention, the State Center for Health Statistics, the North Carolina Behavioral Risk Factor Surveillance Survey and various databases.

Using the primary and secondary data as a guide, the planning committee met to identify the issues. During November of 2013, a community meeting was held to identify and evaluate the data provided in this report. This work will conclude with several strategic planning meetings to guide the development of a Community Action Plan. This plan will be used to address the issues within the county and is due June 2014.

Dissemination Plan

Printed copies of the 2013 Community Health Assessment will be made available at the local libraries. An electronic version of this report will be available for download on the Carteret County Health Department's website, www.carteretcountyhealth.com and Carteret County Health Department's Facebook page. A press release will be issued following the submission of the report, and a presentation will be made to the Carteret County Board of Health. Additionally, if your agency or organization would like a presentation or explanation on the findings from the 2013 Community Health Assessment, or if you would like to learn more about upcoming projects or initiatives related to the Community Health Assessment please call the Carteret County Health Department (252)-728-8550.

More information is also available the Healthy Carolinians website, www.healthycarteret.org

About the CHA Process

Phase 1 – Establish the CHA Team

The 2013 CHA Planning Team was comprised of members representing faith-based organizations, hospitals, local governments, schools, non-profit organizations and businesses. Over the past year, this team worked to direct the activities of the assessment process and provide input on issues of interest.

Phase 2 – Collect Primary Data

Information was collected via community opinion surveys, both online and paper surveys as well as a key informant survey.

Phase 3 – Collect Secondary Data

Information was collected via the State Center for Health Statistics, U.S Census, American Factfinder, and other secondary data sources.

Phase 4 – Analyze and Interpret County Health Data

Information from both primary and secondary sources was analyzed and presented to the CHA Planning Team.

Phase 5 – Determine Health Priorities

Planning meetings were held to determine the priorities.

Phase 6 – Create CHA Document

The document was written and edited with approval by the CHA Planning Team and the Carteret County Board of Health.

Phase 7 – Disseminate CHA Document

The CHA Report was disseminated to local libraries, and is available for download on the Health Department's website. A press-release was sent to local news media outlets, and a post of the report and findings was made on the Health Department's Facebook page. A copy of the report was also sent to county administrators.

Phase 8 – Develop Community Action Plan

Along with community partners and other agencies a Community Action Plan will be developed and submitted by June 2014 to address the priority areas identified by the community

CHAPTER 2: COMMUNITY PROFILE

Geography

Carteret County is a coastal community often referred to as the “Crystal Coast”. Centrally located on North Carolina’s coastline, Carteret is defined by water, bordered on the north by the Pamlico Sound, and by the Atlantic Ocean on the east and south. Geographically, this area covers approximately 1,064 square miles and of that about 506.25 are land. Surrounding counties include Pamlico, Craven, Onslow, and Jones. Carteret County climate and weather is seasonally mild, however with an average elevation of 9 feet above sea level, residents are no stranger to hurricanes, flooding, and tropical weather. On average there are 211 sunny days per year and the average high temperature in July is 88 degrees and in January the average low is 36 degrees.

Several protected area are found in Carteret County including, Cape Lookout National Seashore, Croatan National Forest, and the Cedar Island Wildlife Refuge.

History

Carteret County has a rich history and cultural heritage, nestled along the coastline of North Carolina. This area was first home to Iroquois-speaking Tuscarora Indian Tribes who lived between the Neuse and Pamlico Rivers in eastern North Carolina.

As early as 1706, white settlers of European descent arrived in the region, slowly forcing the tribes away from the coast. Most of the early settlers had migrated from the northern American colonies rather than from Europe. Early settlers depended on the coast for fishing, food, and trade as these Indian trails or “trading paths” developed within the county. These narrow trails widened over time with some being made into roads. Eventually, “The Great Trading Path”, running from the coast to the western part of North Carolina became part of a post road over which mail and stage line was established in 1789 running from Beaufort to Pollocksville. Carteret County was formed out of Craven County in 1722. It is named in honor of Vice Admiral Sir George Carteret, a royalist statesman in Jersey and England, who served in the Clarendon Ministry as Treasurer of the Navy. He was also one of the original Lords Proprietor of the former British colony of Carolina and New Jersey. Carteret, a town in New Jersey as well as Carteret County in North Carolina, both in the USA, is named after him. His heir, Sir John Carteret, later became the Earl of Granville and one of the Lords Proprietors of North Carolina.

History Continued

Beaufort, the county seat, is the third oldest town in North Carolina. It was first appropriately known as “Fishtown” because the fishing industry was an important part of the county’s history. Fishtown was later renamed Beaufort, for Henry Somerset, Duke of Beaufort.

Carteret County participated in global trade almost from its beginning. Plantations produced goods such as tobacco, grains, salted meats and fish to export to England. Lumber was also a major export due to the area’s vast forests. The most significant commercial industry was naval stores—tar, pitch, rosin, and turpentine. Portsmouth and Beaufort served as the county’s major ports. Ships landed in Portsmouth and workers transferred cargo to smaller boats for transport to the mainland. However, as its depth decreased, Portsmouth harbor declined as a port of entry and the town was abandoned.

Carteret County has faced its share of adversity over the years as both a safe haven and target for pirates. Blackbeard was known to frequent the waters and docks of Beaufort and the remnants of his ship, “Queen Anne’s Revenge”, have been recovered off the coast. Carteret County residents have also served in various roles in all of the major conflicts from the Revolutionary War, Civil War, WWI and WWII. Much of this history can be viewed up close by visiting Fort Macon in Atlantic Beach, the Maritime Museum in Beaufort, or the History Place in Morehead City. For an underwater shipwreck experience, dive the “Graveyard of the Atlantic” as more than 2,000 shipwrecks can be found off North Carolina’s coast where the cold waters of the Labrador Current, which originates around the coast of Norway, collide with the warm waters of the Gulf Stream.

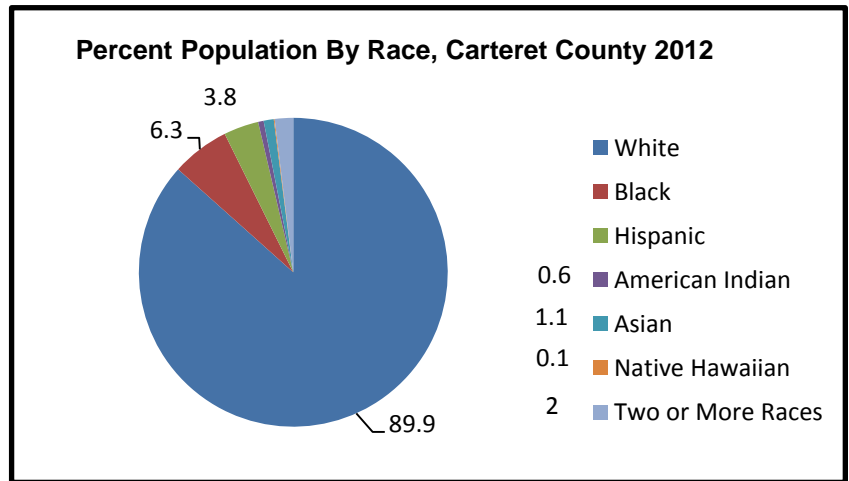
Historically, the lumber industry was the most widespread and very lucrative business in the county. Early sawmills were established and operated in what is now the Mill Creek and Newport area. However, fishing and other water-related activities were, and continue to be the main commercial activity in the county. Over the years, whaling, menhaden fishing, mullet, sea trout, diamond-back terrapin, oysters, bay scallops, crab and shrimp fisheries have played a part in the development and commerce of the commercial fishing industry. Many families in the down east region of the county continue the family tradition of commercial fishing as a business and way of life.

Morehead City, the centralized “hub” of the county, was not established until 1858. Originally starting as a railroad town and deep water port, this area soon began attracting tourists, and second homeowners, a trend that continues to this day. As the county continues to grow and change, many hold on to the traditions and values of the past.

Population

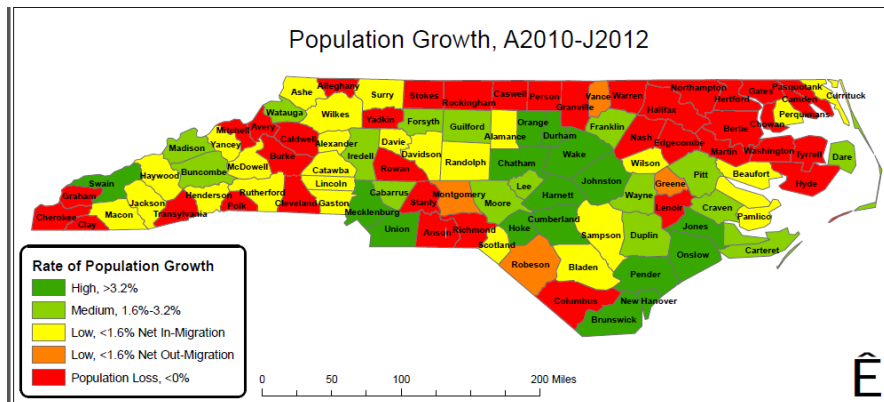
According to the US Census Bureau, Carteret County's population estimate for 2012 was 67,632. Approximately 50.7% of the population is female and 49.3% is male. The county population is racially composed of 89.9% White, 6.3% Black, 3.8% Hispanic, .6% American Indian, 1.1% Asian, .1% Native Hawaiian or Pacific Islander, and 2.0% percent of the population identify with two or more races.

These numbers indicate a slight decrease in White and Black races and slight increase in Hispanic population since the 2009 Community Health Assessment. Racially, the Black population had a negative percent change from 2008 to 2012 from 7.4% of the population to around 6.3%, a decrease of around 14%. Whereas, the Hispanic population increased from 2.5% to 3.8%, a 52% increase.



Population Growth Trend

The population has steadily increased by 13.9% since 2000. Chart 2, below, presents information on the rate of population growth across North Carolina from 2010 to 2012. Carteret County was rated in the medium growth for a rate of 1.6%-3.2% during those two years. During the seasonal summer months, the population drastically increases as projections from Carteret Economic Development Council indicate between ~150,000 to ~170,000 people visit the county. This does not including the permanent full-time resident population of over 67,000. The beautiful beaches of the Crystal Coast make Carteret County a very popular vacation destination year round, as well as an ideal location for second homeowners and retirees.

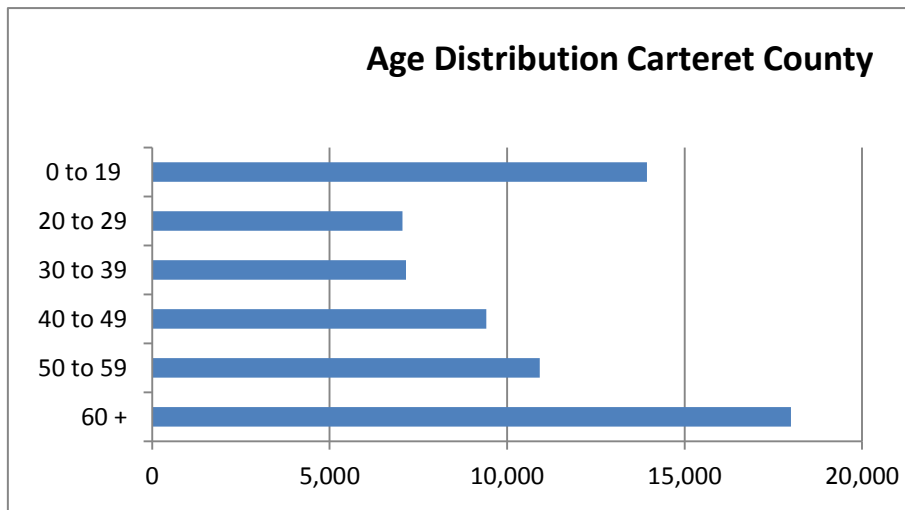


http://www.osbm.state.nc.us/ncosbm/facts_and_figures/socioeconomic_data/population_estimates/demog/2012provgrowthmig.pdf

Age Distribution

The median age in Carteret County is 45.8 years old. The chart provides a number and percentage of age distribution based on the 2010 Census Total Population for Carteret County. The two largest percentages of the population are ages 0-19 and 60+.

Total population	66,469	100.0
0 to 19 years	13,935	21.0
20 to 29 years	7,055	10.6
30 to 39 years	7,152	10.8
40 to 49 years	9,414	14.1
50 to 59 years	10,916	16.4
60+	17,997	27.0

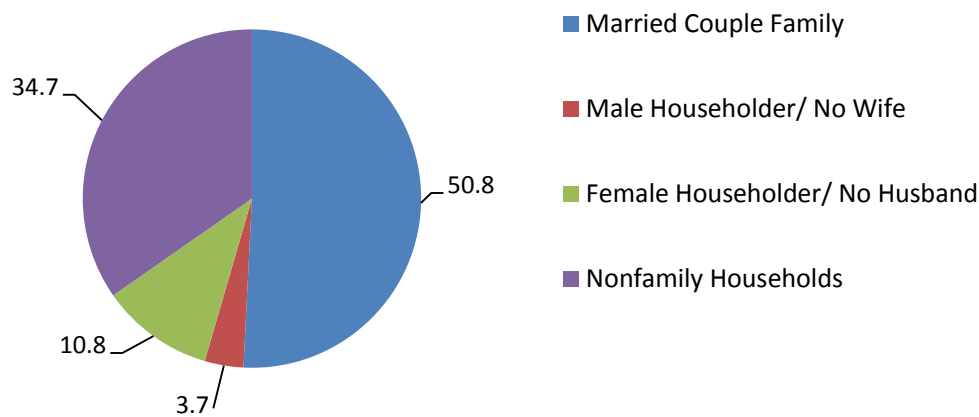


Source: American Fact Finder Profile of General Population and Housing Characteristics:

Composition of Families with Children

The total number of households in Carteret County was 28,692. Approximately 65.3% of the households are families and 34.7% are nonfamily households. Of that 34.7%, 29.8% live alone. Chart 4 and 5 below depict household composition in Carteret County for 2007-2011.

Household Composition for Carteret County



Household Composition

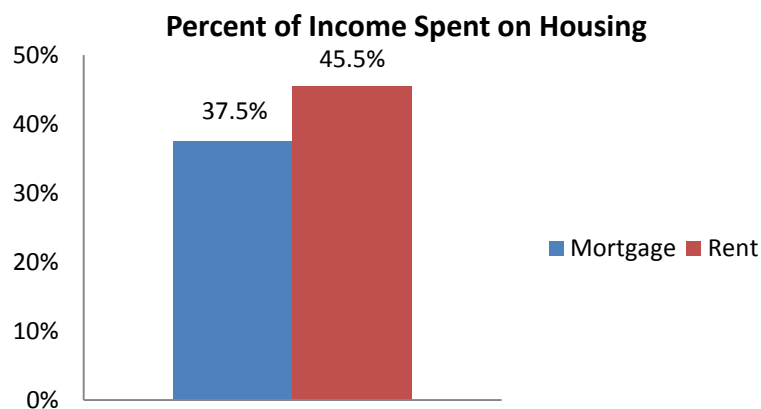
Total households Carteret County	28,692	%
Family households (families)	18,742	65.3%
* Married-couple family	14,578	50.8%
With own children under 18 years	4,126	14.4%
* Male householder, no wife present, family	1,053	3.7%
With own children under 18 years	477	1.7%
* Female householder, no husband present, family	3,111	10.8%
With own children under 18 years	1,748	6.1%
* Nonfamily households	9,950	34.7%
Householder living alone	8,561	29.8%
65 years and over	3,376	11.8%

Housing

According to the 2007-2011 American Community Survey, there are 47,901 housing units in Carteret County. 59.9% of that is occupied housing and 40.1% are vacant housing units as there are a large number of second homes or vacation rentals that are not occupied year-round. Carteret County's property values are also significantly higher than the state average.

	Carteret	NC
Median value of owner-occupied housing units, 2007-2011	\$208,200	\$152,700

The chart below provides information on the percent of income spent on housing costs for both homeowners and renters. Approximately, 45.5% of renters pay 30% or more of their monthly income on housing costs/rent. Spending a high percentage of household income on rent can create financial hardship, especially for lower-income renters. With a limited income, paying a high rent may not leave enough money for other expenses, such as food, transportation and medical. Moreover, high rent reduces the proportion of income a household can allocate to savings each month.



Housing

Type of Structure

UNITS IN STRUCTURE	Carteret		NC
	47,901	Percent	Percent
Total housing units			
Single-family homes	26,585	55.5%	65.3%
1-unit, attached	2,254	4.7%	3.6%
2 units	1,365	2.8%	2.2%
3 or 4 units	1,472	3.1%	2.8%
5 to 9 units	1,381	2.9%	4.3%
10 + units	4,483	9.3%	7.6%
Mobile home	10,348	21.6%	14.1%
Boat, RV, van, etc.	13	0.0%	0.0%

Around 21.6% of the housing structures in Carteret County are mobile homes. This figure is important for emergency preparedness and storm evacuation planning.

Education

Public Schools

Carteret County Schools provide pre-kindergarten through 12th grade instruction to over 8,700 students in the county. All 16 of the county's public schools are ranked by the state as NC Schools of Distinction or higher. Carteret County's three high schools are ranked in the top 10 percent in the state based on 2011-2012 end-of-course test results in algebra I, English I and biology, which are used to measure academic proficiency under the state's academic accountability program. Of the state's 350 traditional public high schools, Croatan High School is ranked ninth; West Carteret High School ranked 15th; and East Carteret High School ranked 32nd, and all three high schools scored at least 90 percent proficiency on the exams.

Charter Schools

There are two charter schools in Carteret County, the Tiller School and Coastal Academy for Technology and Science (formerly Cape Lookout Marine Science High School.) The Tiller School serves grades K-5 and was recognized as an Honor School of Excellence during the 2011-2012 school years. Coastal Academy for Technology and Science serves grades 9-12, and provides specialized support for students preparing for marine sciences, marine-related technical or other careers that require post-secondary training.

Private and Home Schooling Data

In Carteret County, there are 418 home schools serving over 602 children and approximately 5 private schools serving 352 students grades prek-12th.

Sources: 2013 North Carolina HOME SCHOOL Statistical Summary Information from the 2012-2013 school term Published August, 2013.

2013 North Carolina Private School Statistics Information from the 2012-2013 School Year Published June, 2013.

Education Continued

4-Year Cohort Graduation Rates

Individuals who do not finish high school are more likely than people who finish high school to lack the basic skills required for an increasingly complicated job market and society. The Healthy People 2020 national health target is to increase the proportion of students who graduate high school within four years of their first enrollment in 9th grade to 82.4%. Carteret County's 4 year cohort graduation rate for the 2012-2013 school year was 84.7%. Furthermore, Carteret County's graduation rate has increased every year since 2010.

High School Drop Out Counts

2011-2012 Grade 7-13 Dropouts by Local Education Agency (LEA), Gender, Race/Ethnicity

LEA Name	Total	Male	Female	White	Black	Am. Indian	Hispanic	Asian	Pac. Islander	Multiracial
Carteret County Schools	83	55	28	67	5	<5	6	<5	<5	<5
Coastal Academy for Technology and Science	11	6	5	5	<5	<5	<5	<5	<5	<5

Source: NC Public Schools Annual Dropout Reports 2011-2012

Carteret County Public Schools and SAT Scores 2012

High Schools	# Tested	% Tested	Math Score	Critical Reading Score	Writing Score	M +CR	M+CR+W
Croatan	134	73.2	546	526	509	1072	1581
East Carteret	59	62.1	511	491	468	1002	1470
West Carteret	142	58.4	527	512	485	1039	1524
NC	63,271	68.0	506	491	472	997	1469

Source: SAT Report 2012, (State, Districts and Schools) Updated October 15, 2012.

Educational Attainment in Carteret County

	Carteret	State
High school graduate or higher, percent of persons age 25+	87.5%	84.1%
Associates degree or higher, percent persons age 25+	34.5%	37.7%
Bachelor's degree or higher, percent of persons age 25+	23.7%	26.5%

Sources: U.S. Census Bureau: State and County QuickFacts. June 2013 2007-2011 ACS 5 year estimates
Lumina Foundation for Education, March 2012 NC Report 2006-2010 ACS 5 year estimates

Income

According to the US Census population definitions, a “family” consists of two or more people (one of whom is the householder) related by birth, marriage, or adoption residing in the same housing unit. The median family income was \$59,229 for Carteret County, which is slightly higher than the state’s median family income of \$57,171.

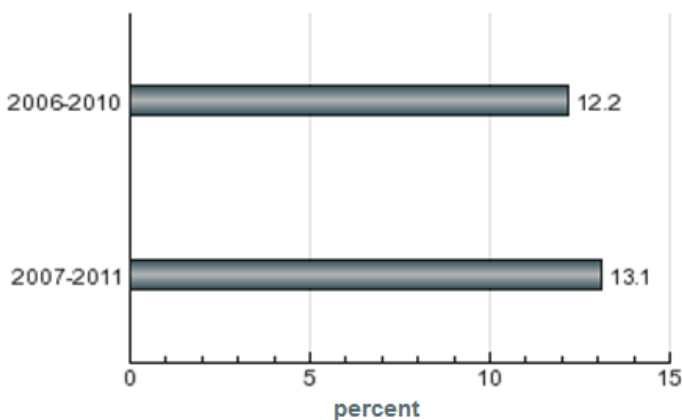
The US Census defines a “household” as consisting of all people who occupy a housing unit regardless of relationship. A household may consist of a person living alone or multiple unrelated individuals or families living together. The median household income in Carteret was \$47,403 which was slightly higher than the state’s median household income of \$46,291.

When considering the income differences in Carteret County, it is important to consider the large number of retirees living in the area.

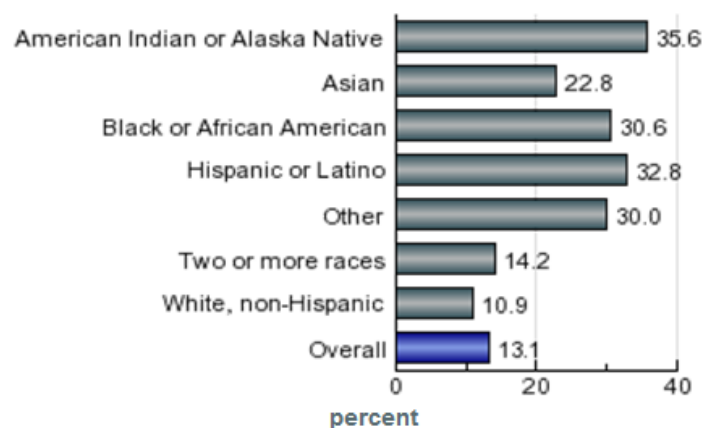
Poverty

Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. A high poverty rate indicates that local employment opportunities are not sufficient to provide for the local community. Although the rate from 2007-2011 in Carteret was 13.1% and is lower than the state average of 16.1%, the poverty rate in Carteret County did rise in 2007-2011 from 12.2% in 2002-2006.

Time Series Data



People Living Below Poverty Level by Race/Ethnicity



Poverty Continued

Poverty rates also highlight racial and geographic disparities within the county. Poverty rates broken down by zip code indicate lower poverty rates on the island, compared to higher poverty rates in the Down East and Western regions of the county.

Higher Poverty Rates

Harkers Island, 28531 poverty rate of 14.8%
 Williston, 28589 poverty rate of 55.7%
 Beaufort, 28516 poverty rate of 14.8%
 Newport, 28570 poverty rate of 15.9%
 Stella, 28582 poverty rate of 17.1%

Lower Poverty Rates

Emerald Isle, 28594 poverty rate 5.4%
 Atlantic Beach, 28512 poverty rate 10.6%
 Pine Knoll Shores, 28512 poverty rate 2.6%

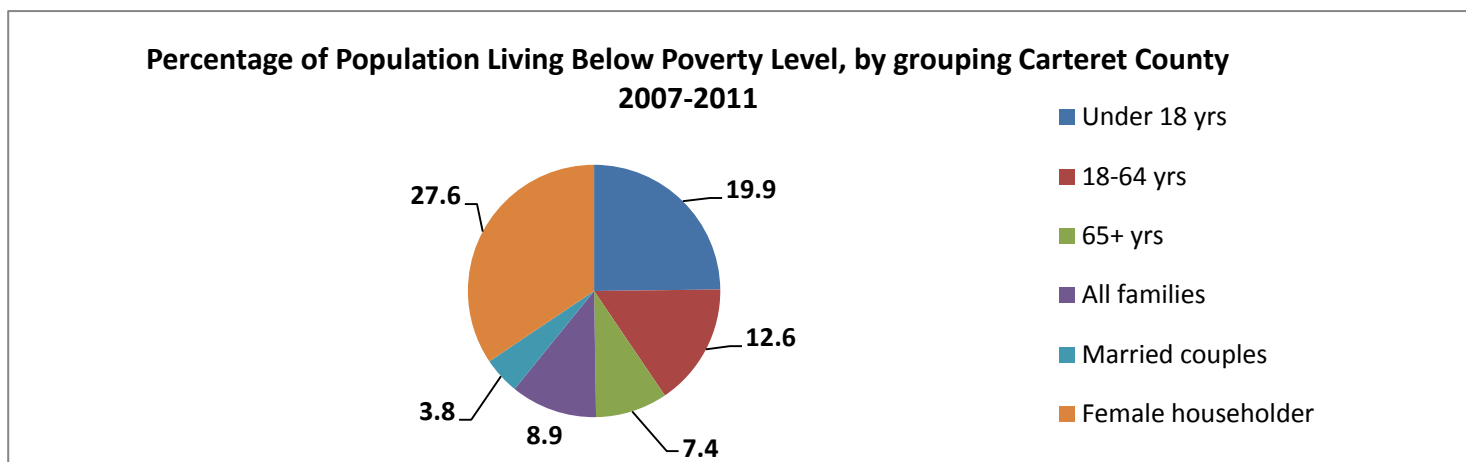
Poverty by Age	Carteret	NC
All People in poverty	13.1%	16.1%
Under 18 years in poverty	19.9%	22.6%
18 years and over in poverty	11.4%	14.0%
18-64 years in poverty	12.6%	14.7%
65 years and over in poverty	7.4%	10.3%
All families	8.9%	11.8%
With related children under 18 years	16.2%	18.8%
With related children under 5 years only	17.6%	20.3%
Married couple families	3.8%	5.5%
With related children under 18 years	5.9%	8.0%
With related children under 5 years only	2.2%	7.4%
Families with female householder, no husband present	27.6%	33.1%
With related children under 18 years	35.6%	41.7%
With related children under 5 years only	61.2%	50.3%

Source: U.S. Census Bureau, 2007-2011 American Community Survey

Approximately 27.6% of families in poverty are from a single female household. When factoring in single female-householder with children under the age of 5, that percentage jumps to 61.2%. This number is significantly higher than the state's average. Additional community resources could be focused to address the needs and gaps in services for single-female householders, with children under the age of five.

Poverty Continued

Below is an additional chart, which breaks down the population living below the poverty level by age, and household characteristics.



Federal Assistance

According to 2009-2011 data from the United States Department of Agriculture- Food Environment Atlas, approximately 17.1% of the households in Carteret County were food insecure. This number is up 3.4% from 2006-2008 when 13.7% of households were food insecure. The USDA defines food insecurity as meaning “consistent access to adequate food is limited by a lack of money and other resources at times during the year.” Because of this need, many churches began providing free meals once a week to the community, as well as expanding into other areas such as community gardening and food pantries.

For a complete list of food banks and food assistance, please go to [Appendix A: Community Resource Guide](#)

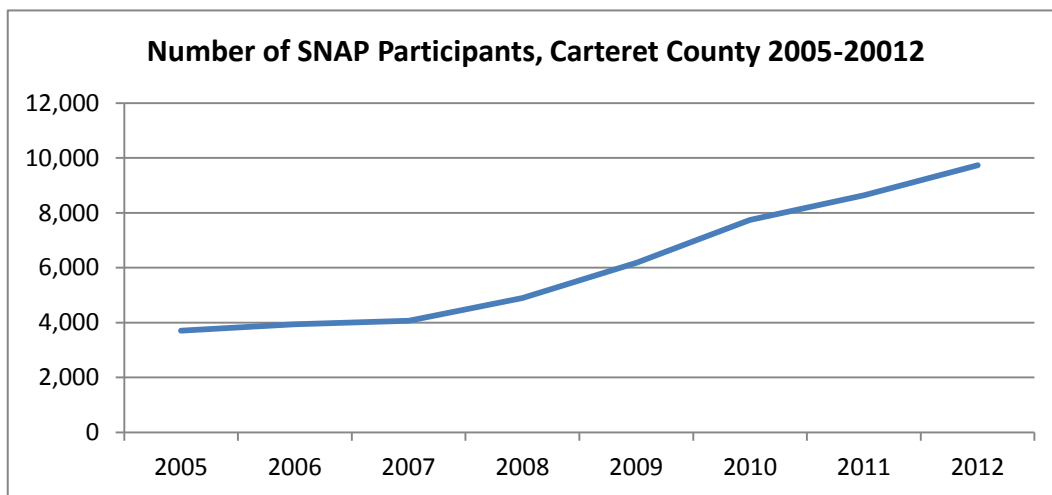
WIC

WIC stands for Women, Infants and Children. It is the Special Supplemental Nutrition Program for Women, Infants, and Children funded by the United States Department of Agriculture. WIC is for children up to 5 years of age, infants, pregnant women, breastfeeding women who have had a baby in the last 12 months, and women who have had a baby in the last 6 months. To be eligible, the family income must be less than 185% of the U.S. Poverty Income Guidelines. A person receiving Medicaid, Work First Families Assistance (TANF), or assistance from the NC Food and Nutrition Services automatically meets the income eligibility requirement.

SNAP/EBT (Food Stamps)

The Supplemental Nutrition Assistance Program (SNAP, formerly the Food Stamp Program) is the Nation's largest domestic food and nutrition assistance program for low-income Americans. Several farm stands and farmers markets in Carteret County have submitted paperwork to accept SNAP benefit cards. Once approved by the USDA, this will enable individuals on SNAP to purchase fresh fruit and produce from local farmers.

The following chart provides trend data from the Department of Health and Human Services, Food and Nutrition Service on participation in federal food assistance programs in Carteret County from 2005-2012.

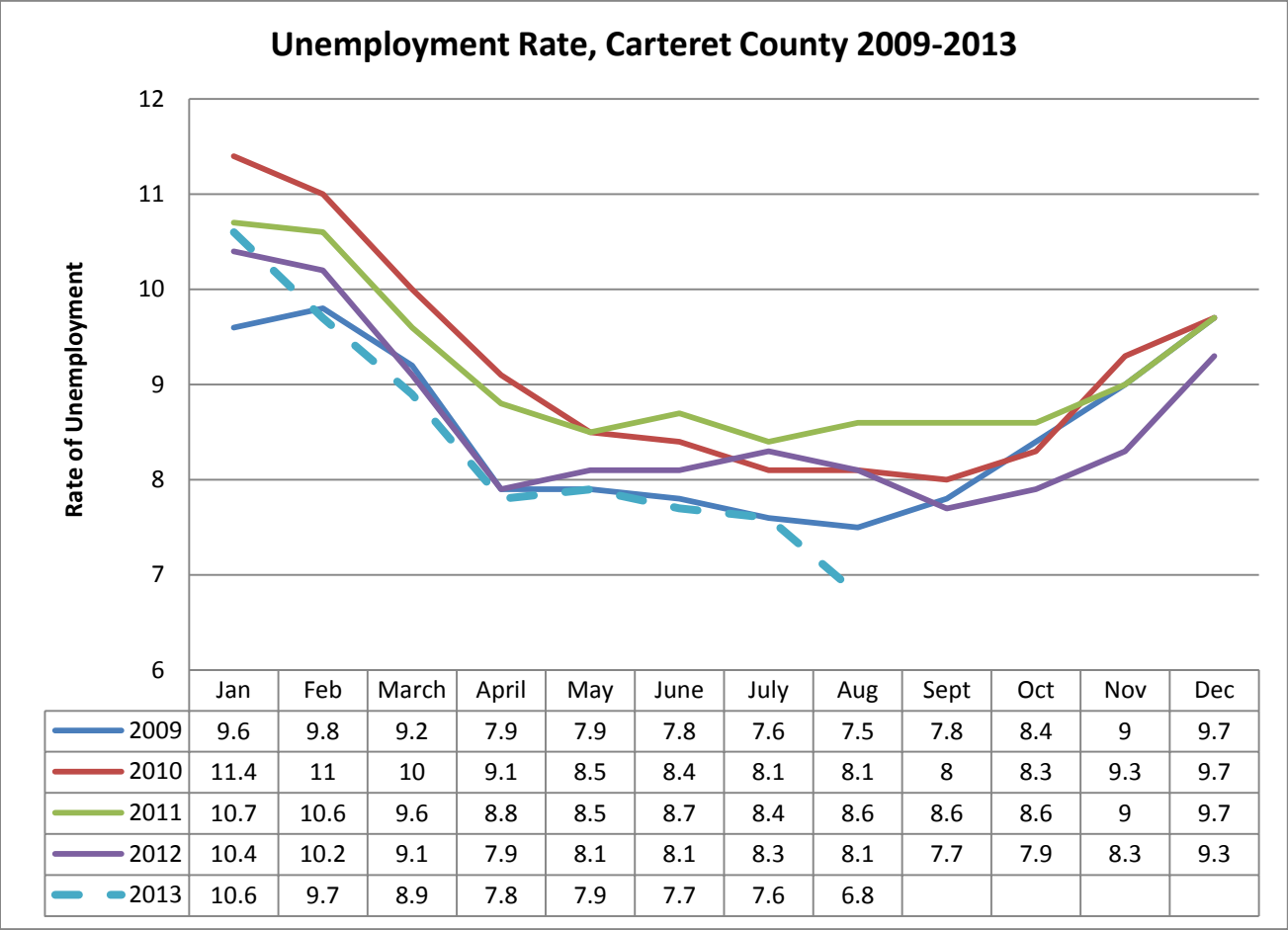
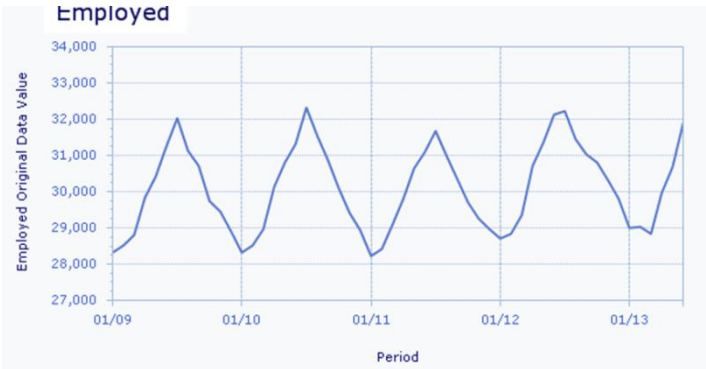


Employment

Unemployment rates are the percentage of the workforce which is unemployed. In Carteret County, this rate cycles with the seasons. Typically, unemployment rises during the winter months, peaking in January, when seasonal businesses close down for the winter and unemployment decreases from April to August.

According to the Bureau of Labor statistics, persons are classified as unemployed if they do not have a job, have actively looked for work in the prior 4 weeks, and are currently available for work. Individuals who have left a job, or were fired and have not applied for benefits or contacted an employment agency are considered not in the workforce, and are not included in the statistics on the following pages.

Employment



Source: Employment Security Commission, Demand Driven Data Delivery System, Unadjusted Data Carteret County, NC 2009-2013

Economy

According to participants of the 2013 Community Opinion Survey and the 2013 Key Informant Survey, “Increase Job Opportunities”, and “Increase Opportunities for Economic Development and Smart Growth”, were selected as two of the five most important community issues for Carteret County to address. Additional comments were also made about, “increasing the number of family friendly entertainment venues”, such as, bowling alleys, skating rinks, water parks, movie theaters, skateboard parks, and more. These types of entertainment facilities could be used to target local families, as well as those visiting the county during the seasonal months. See [Appendix B](#) for a complete listing of survey results.

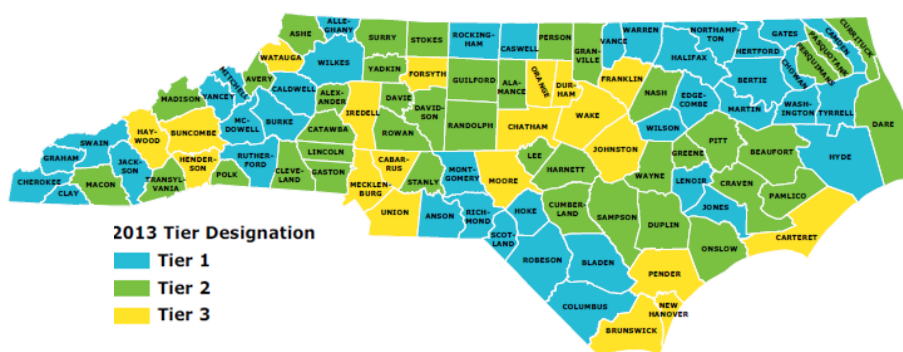
Tier Designations: Economic Development

Every year, the N.C. Department of Commerce annually ranks the state’s 100 counties based on economic well-being and assigns each a Tier designation. The 40 most distressed counties are designated as Tier 1, the next 40 as Tier 2 and the 20 least distressed as Tier 3. Carteret County continues its designation as “Tier 3”. The designations, which are mandated by state law (G.S. 143B-437.08), determine a variety of state funding opportunities to assist in economic development including tax incentives. Eligible businesses that locate in lower-tiered counties are eligible for some grant programs and larger tax credits than those that locate in higher-ranked areas such as Carteret County.

Factors which determine this ranking are:

1. Average rate of unemployment for the most recent 12 months for which data are available.
2. Median household income for the most recent 12 months for which data are available.
3. Percentage growth in population, for the most recent 36 months for which data are available.
4. Adjusted assessed property value per capita as published by the Department of Public Instruction, for the most recent taxable year

For more information visit, <http://www.nccommerce.com/research-publications/incentive-reports/county-tier-designations>.



Top Employers

Below is the list of the top employers in Carteret County. However, Marine Corp Air Station Cherry Point, Fleet Readiness Center East in Craven County remains the largest employer of Carteret County residents.

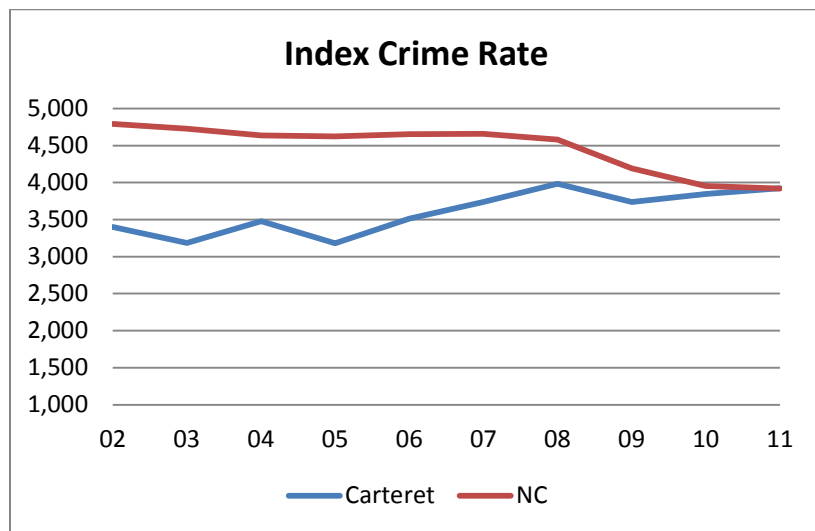
The top ten employers in Carteret County 2012

Rank	Company	Industry	Employment Range
1	Carteret County Board Of Education	Education & Health Services	1,000+
2	Carteret County General	Education & Health Services	500-999
3	County of Carteret	Public Administration	250-499
4	Wal-Mart Associates Inc. Trade,	Transportation & Utilities	250-499
5	Carteret Community College	Education & Health Services	250-499
6	Century Employer Organization Llc	Professional & Business Services	250-499
7	Food Lion Trade,	Transportation & Utilities	250-499
8	NC Dept. Of Environment & Natural	Public Administration	250-499
9	Lowes Home Centers Inc. Trade,	Transportation & Utilities	250-499
10	Big Rock Sports Llc Trade,	Transportation & Utilities	100-249

Crime

The charts below present annual crime rates for Carteret County from 2002 through 2011. The “index crime rate”, is the sum of the violent crime rate (murder, forcible rape, robbery, and aggravated assault) plus the property crime rate (burglary, larceny, arson, and motor vehicle theft).

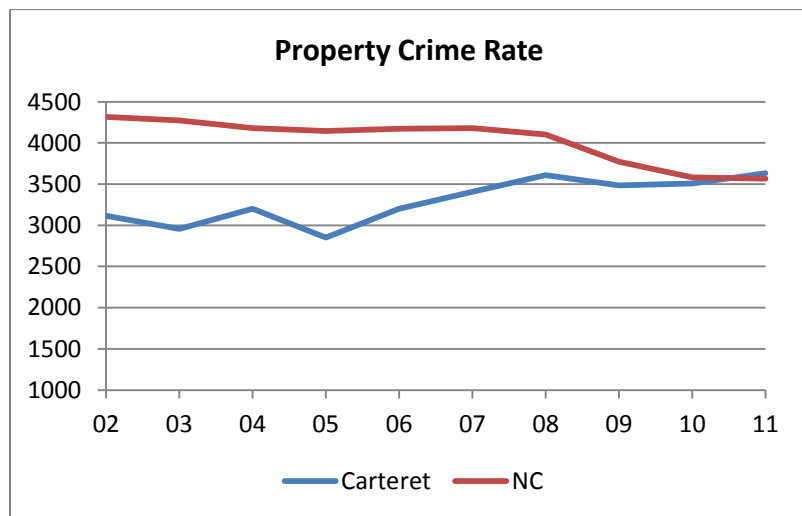
Index Crime Rate per 100,000



Carteret			
Year	Index Rate	Violent Rate	Property Rate
2002	3,399.3	283.6	3,115.7
2003	3,183.3	226.4	2,956.8
2004	3,476.7	274.0	3,202.7
2005	3,179.2	329.7	2,849.5
2006	3,515.0	313.9	3,201.1
2007	3,736.7	330.4	3,406.3
2008	3,983.0	372.9	3,610.1
2009	3,737.4	253.5	3,483.9
2010	3,844.7	338.4	3,506.3
2011	3,924.3	292.3	3,632.0

Property Crime per 100,000

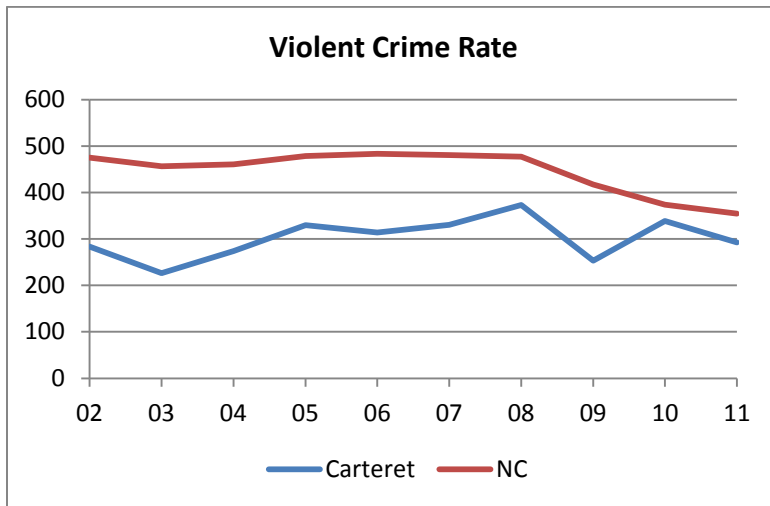
The chart below shows trend data for 2002 to 2011 comparing NC and Carteret's property crime rate. Property crime trend appears to be increasing.



Carteret				
Year	Burglary Rate	Larceny Rate	MVT Rate	Arson Rate
2002	835.6	2,140.9	139.3	11.7
2003	767.5	2,069.5	119.9	18.3
2004	873.3	2,165.9	163.4	11.6
2005	709.6	1,996.1	143.9	12.9
2006	987.9	2,088.9	124.3	9.6
2007	947.2	2,309.7	149.5	18.9
2008	966.9	2,508.9	134.3	12.6
2009	1,048.5	2,320.5	114.9	9.4
2010	1,060.1	2,353.5	92.7	9.3
2011	1,382.1	2,160.0	89.9	19.5

Violent Crime per 100,000

A violent crime is a crime in which the offender uses or threatens to use violent force upon the victim. Violent crimes include homicide, assault, rape, and robbery. Violence negatively impacts communities by reducing productivity, decreasing property values, and disrupting social services. Chart 18 shows trend data for 2002 to 2011 comparing NC and Carteret's violent crime rate. Violent crime appears to be decreasing.



Carteret				
Year	Murder Rate	Rape Rate	Robbery Rate	Assault Rate
2002	1.7	33.6	47.0	201.3
2003	--	33.3	48.3	144.8
2004	3.3	39.6	39.6	191.5
2005	4.8	19.4	40.4	265.1
2006	1.6	46.2	30.3	235.8
2007	3.1	37.8	50.3	239.2
2008	1.6	34.8	39.5	297.0
2009	3.1	22.0	25.2	203.1
2010	1.5	38.6	34.0	264.2
2011	4.5	28.5	34.5	224.8

Juvenile Crime

Juvenile Crime accounted for 8.8% of all arrests in Carteret County in 2010. The chart on the following page provides a breakdown of crime statistics by percentage of arrests.

Property Crime, Vandalism, Underage Drinking, Disorderly Conduct, and Runaways account for the highest percentage of arrests among individuals under the age of 18.

The Juvenile Crime Prevention Council of Carteret County meets to discuss trends in juvenile crime, as well as strategies and programs to address these issues. Input from a recent council meeting indicates, cyber bullying continues to increase within the school system.

Juvenile Crime

Percent of All Arrests Involving Persons under the age of 18 in Carteret County

	2006	2007	2008	2009	2010
Coverage Indicator	100%	~	100%	100%	100%
% of Total Arrests Involving Under 18	8.9%	~	9.1%	6.9%	8.8%
Violent Crime	7.1%	~	6.2%	8.1%	5.6%
Murder	0	~	0	0	0
Rape	6.3%	~	0	0	9.1%
Robbery	20%	~	4.5%	7.7%	44.4%
Aggravated Assault	6.8%	~	6.7%	8.5%	1.9%
Property Crime	24.1%	~	23.1%	15%	21.9%
Burglary	25%	~	24.9%	7.6%	30.4%
Larceny-theft	24%	~	21.9%	19.5%	17.2%
Motor vehicle theft	11.8%	~	23.1%	21.4%	0
Arson	100%	~	0	0	0
Non Index					
Other Assaults	9.3%	~	10.2	8.2%	8.7%
Forgery and Counterfeiting	4.5%	~	0	0	0
Fraud	3.7%	~	3.4%	2.1%	1.4%
Embezzlement	7.1%	~	40%	5.3%	0
Stolen Property	19%	~	17.4%	8.3%	13%
Vandalism	31.8%	~	11.7%	19.8%	30.6%
Weapons	10.8%	~	18.2%	13%	26.3%
Sex Offenses	0	~	7.1%	0	0
Drug Abuse Violations	11%	~	14%	9.3%	9.8%
Driving Under Influence	1.9%	~	1.1%	1.8%	.7%
Liquor Laws	30.3%	~	31.9%	25.5%	43.1%
Disorderly Conduct	36.7%	~	17.7%	21.8%	25.2%
All Other Offenses	5.1%	~	4.5%	4.4%	4.2%
Runaways	100%	~	100%	100%	100%

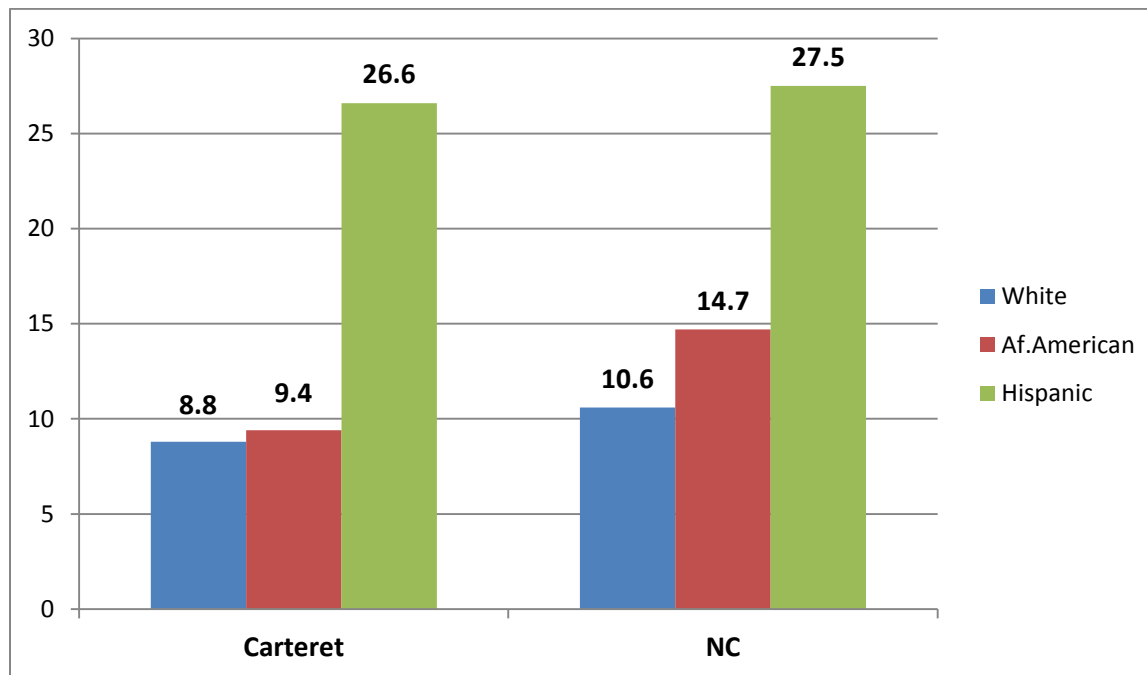
These statistics are estimates that account for missing data and may differ from other published sources. The county-level files which are the source of this information are not official FBI releases and are being provided for research purposes. The Coverage Indicator refers to the relative size of the sample from which these estimates are based. A coverage indicator of 90% means that data covering 10% of the jurisdiction's population are estimated and that data from 90% of the jurisdiction's population are based on actual reports. Only jurisdictions with a coverage indicator at or above 90% are displayed in this application. Click on the [Data Coverage](#) tab to find out what years are available for your jurisdiction of interest. Source: Puzzanchera, C. and Kang, W. (2013). "Easy Access to FBI Arrest Statistics 1994-2010" Online. Available: <http://www.ojdp.gov/ojstatbb/ezaucr/>

CHAPTER 3: HEALTH STATUS AND HEALTH OUTCOMES

Maternal Health

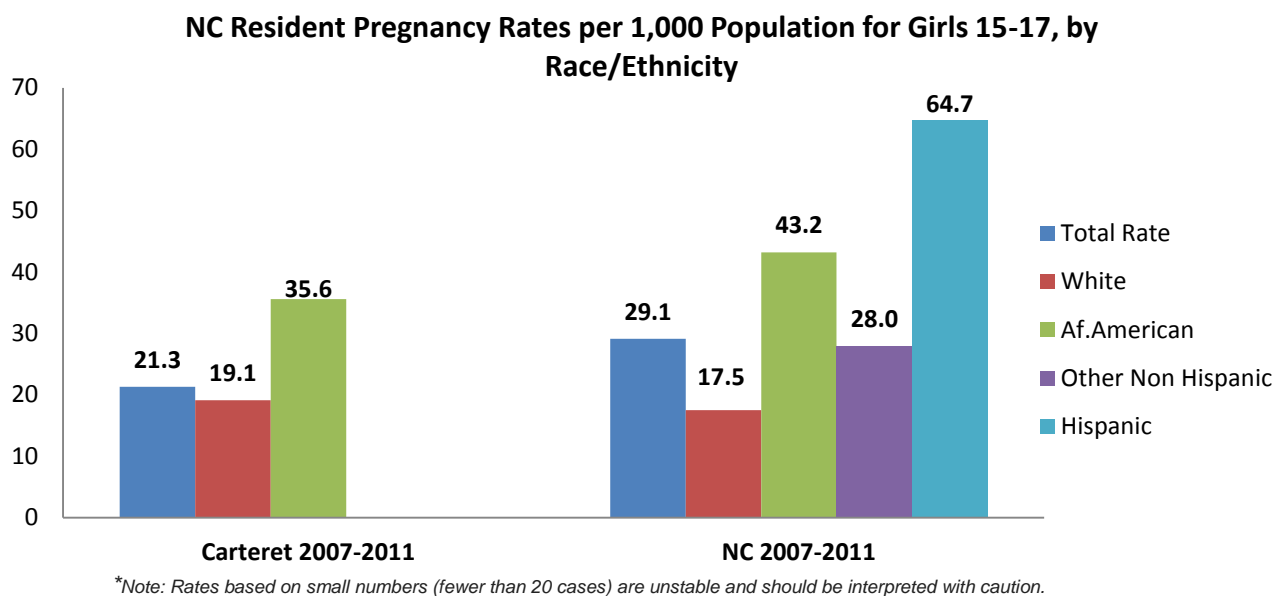
Maternal Health is an important predictor of newborn health and well-being, and addressing women's health is essential to improving birth outcomes.

Live Birth Rate by Race 2007-2011



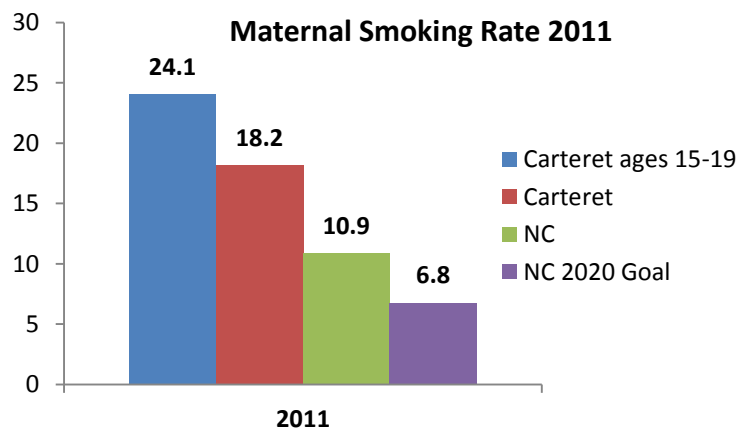
Teen Pregnancy Rate

Teen pregnancy and childbearing have substantial social and economic impacts for communities. Pregnancy, birth, sexually transmitted disease and abortion rates are substantially higher among teenagers in the U.S. compared to other western industrialized nations. The Healthy People 2020 national health target is to reduce the teen pregnancy rate to 36.2 pregnancies per 1,000 females aged 15 to 17 years. Carteret County is well below the national target for total teen pregnancy rates at 21.3 live births per 1,000 females aged 15-17.



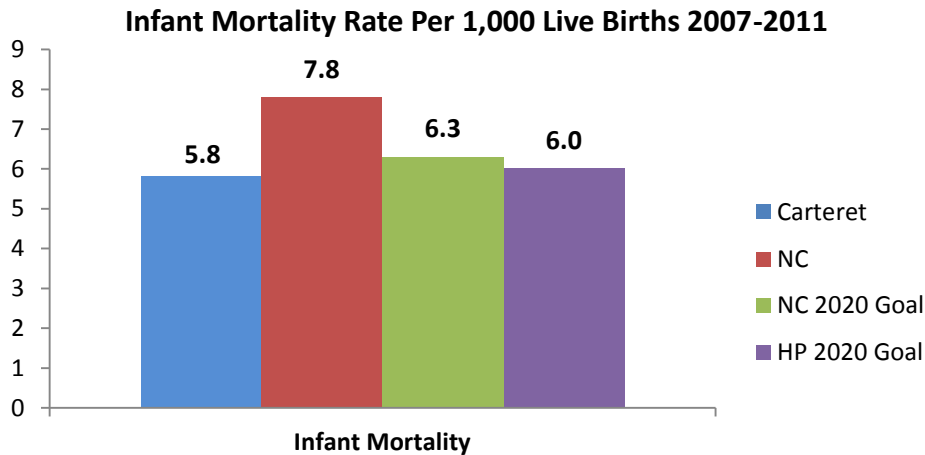
Maternal Smoking

Smoking during pregnancy is associated with multiple adverse birth outcomes, including low-birth-weight babies and pre-term deliveries. Women who smoke during pregnancy are also more likely to have a baby who is premature, who has a low birth weight, or who dies because of SIDS. Carteret County's rate of maternal smoking continues to be higher than the state's rate. In 2008, the rate of maternal smoking was 18.5 having only slightly decreased to 18.2 in 2011.



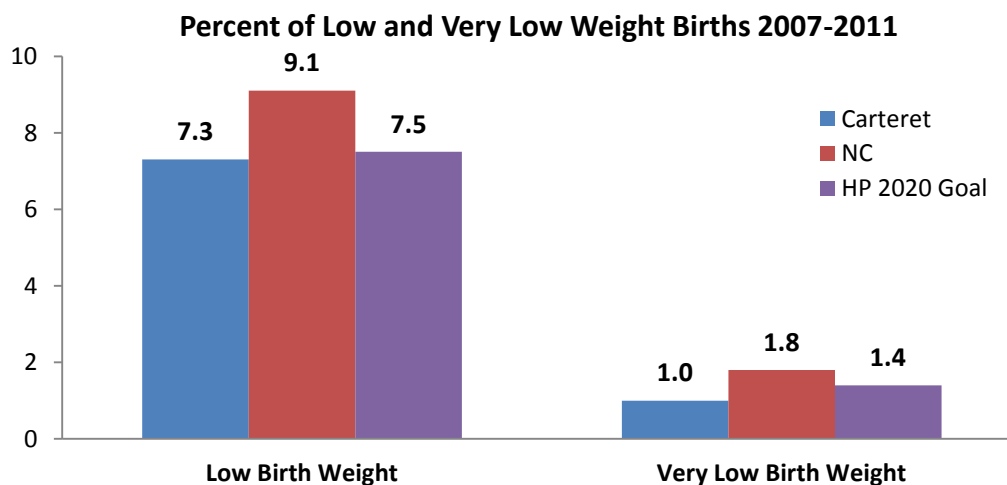
Infant Mortality

Infant mortality rate continues to be one of the most widely used indicators of the overall health status of a community. The leading causes of death among infants are birth defects, pre-term delivery, low birth weight, Sudden Infant Death Syndrome (SIDS), and maternal complications during pregnancy. Carteret County's infant mortality rate is lower than the state's rate, as well as the NC 2020 and HP 2020 national goals for infant mortality.



Low and Very Low Weight Births

Low weight births are births where the newborn weighed less than 2,500 grams (5 pounds, 8 ounces). Very low weight births are births where the newborn weighed less than 1,500 grams (3 pounds, 5 ounces). Babies born in these weight categories are more likely than babies of normal weight to require specialized medical care and often must stay in intensive care nurseries. Low birth weight is often associated with premature birth. Babies born at very low birth weight are at the highest risk of dying in their first year. While there have been many medical advances enabling very low birth weight and premature infants to survive, there is still risk of infant death or long-term disability. To prevent prematurity and low birth weight, expectant mothers should take



prenatal vitamins, stop smoking, stop drinking alcohol and using drugs, and most importantly, get prenatal care.

Mortality Data

The following data represents the leading causes of death in Carteret County for 2007-2011. The table below includes Carteret County's five-year total number of deaths associated with each of the leading causes of death, as well as a comparison for the age adjusted death rates per 100,000 population for both Carteret County and North Carolina.

The six areas where Carteret's Age Adjusted Death Rate is higher than North Carolina's are indicated in red below and include: Cancer, Heart Disease, All Other Unintentional Injuries, Suicide, Motor Vehicle Injuries, and Chronic Liver Disease and Cirrhosis. Data taken from State Center for Health Statistics: Leading Causes of Death, 2012.

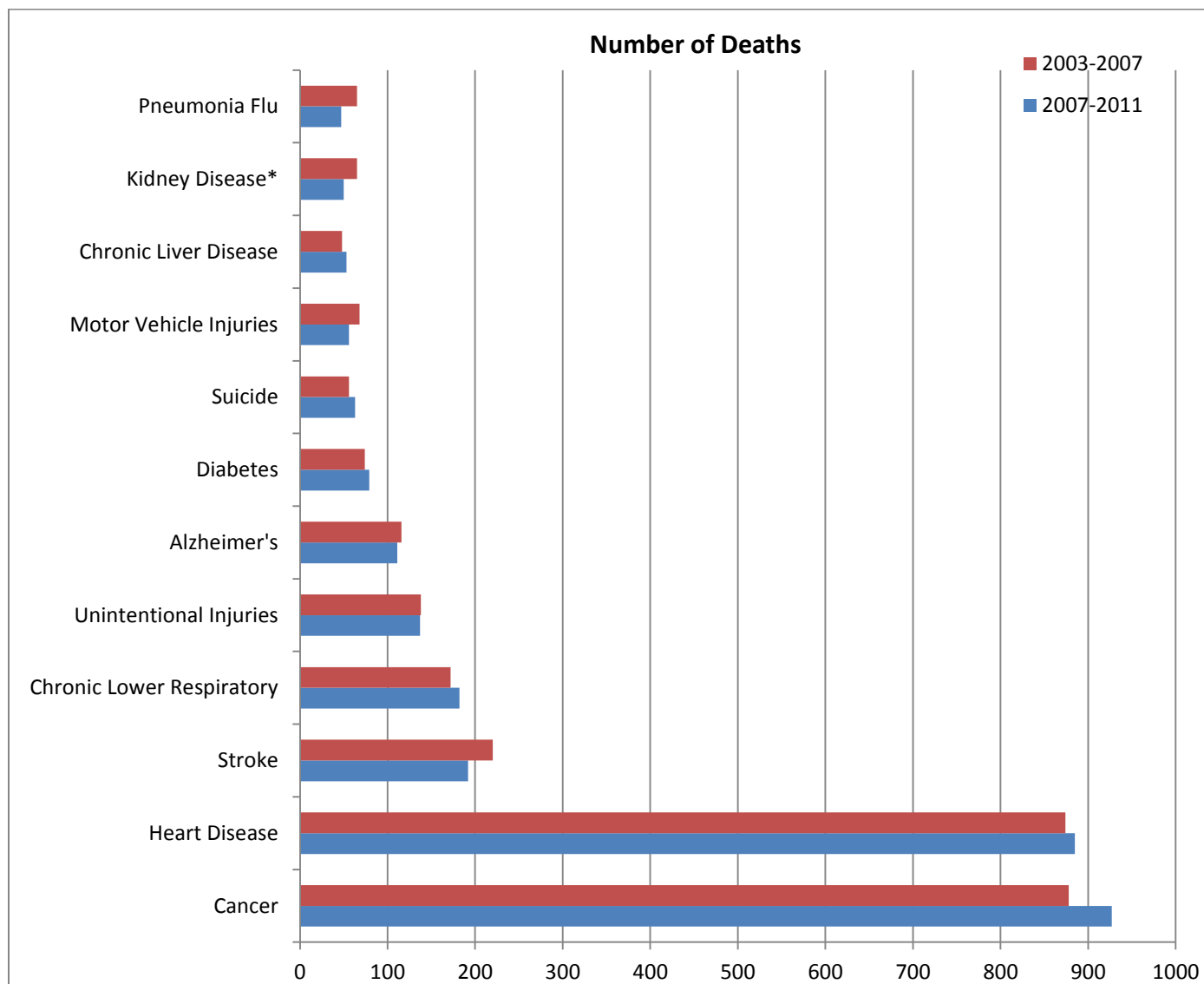
Leading Causes of Death, All Ages 2007-2011

	Number of Deaths 2007-2011	Age Adjusted Death Rate 2007-2011 Carteret County	Age Adjusted Death Rate 2007-2011 North Carolina
Cancer (all sites)	927	196.8	179.7
Heart Disease	885	198.9	179.3
Stroke (Cerebrovascular Disease)	192	43.6	46.0
Chronic Lower Respiratory Disease	182	39.3	46.6
All Other Unintentional Injuries	137	38.6	29.2
Alzheimer's Disease	111	25.7	29.0
Diabetes	79	17.2	22.0
Suicide	63	17.9	12.1
Motor Vehicle Injuries	56	17.0	15.5
Septicemia	54	12.2	13.6
Chronic Liver Disease & Cirrhosis	53	12.0	9.3
Kidney Disease*	50	11.4	18.6
Pneumonia/ Influenza	47	10.7	17.9
Homicide	9	3.1	6.3
HIV Disease	2	0.6	3.5

*Kidney Disease includes: Nephritis, Nephrotic Syndrome, and Nephrosis

Items in **BOLD are areas where Carteret's death rate is significantly higher than the state's death rate for that cause of death.

Number of Deaths by Cause in Carteret County 2003-2007 and 2007 to 2011



Number of deaths in Carteret County from Cancer, Heart Disease, Chronic Lower Respiratory Disease, Diabetes, Suicide, and Chronic Liver Disease have increased from 2003-2007 to 2007-2011.

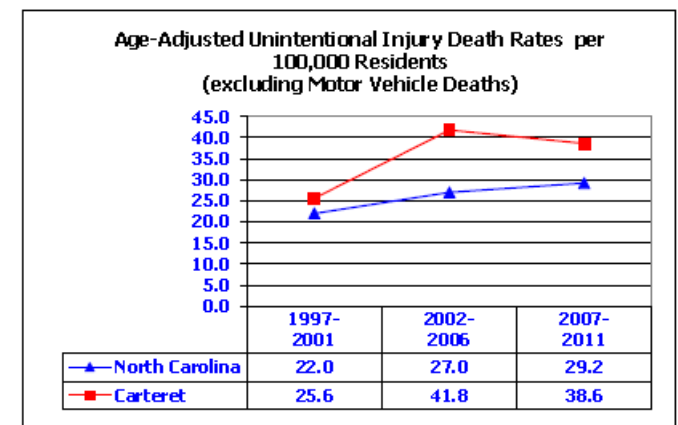
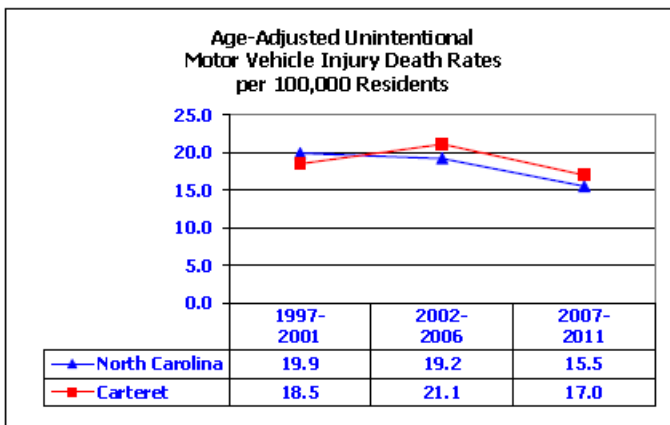
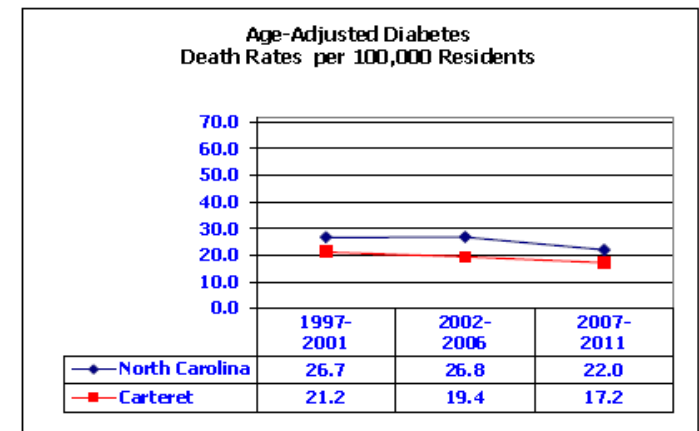
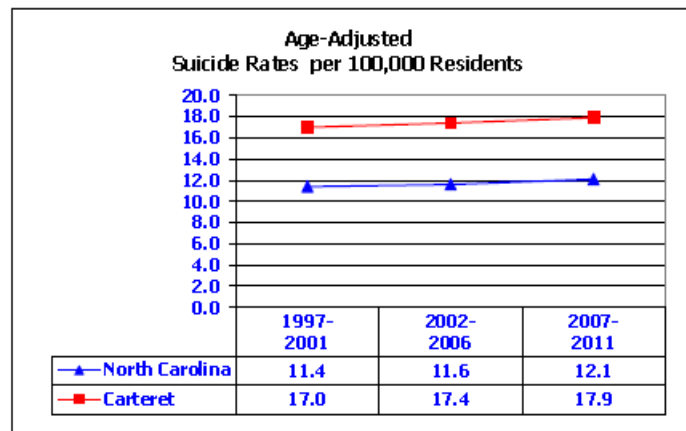
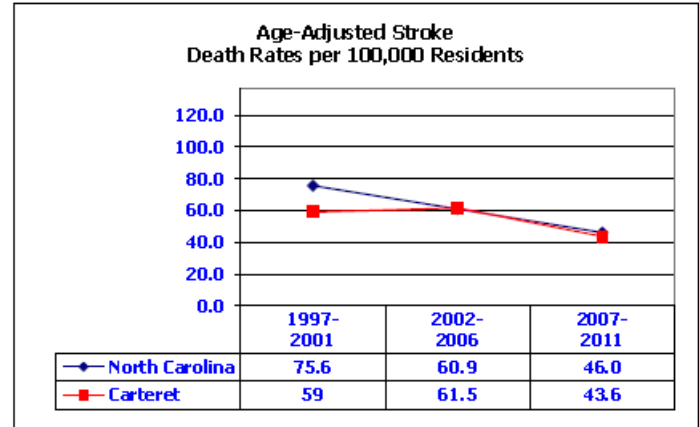
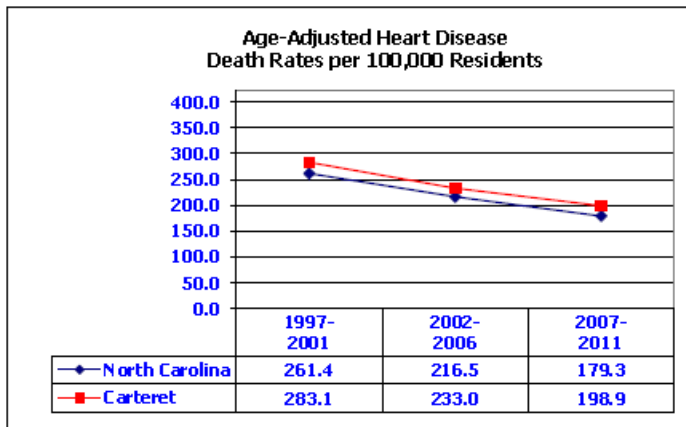


Number of deaths in Carteret County from Stroke, Alzheimer's, Motor Vehicle Injuries, Nephritis, Kidney Disease, and Pneumonia have decreased from 2003-2007 to 2007-2011.

**Kidney Disease includes Nephritis, Nephrotic Syndrome, and Nephrosis*

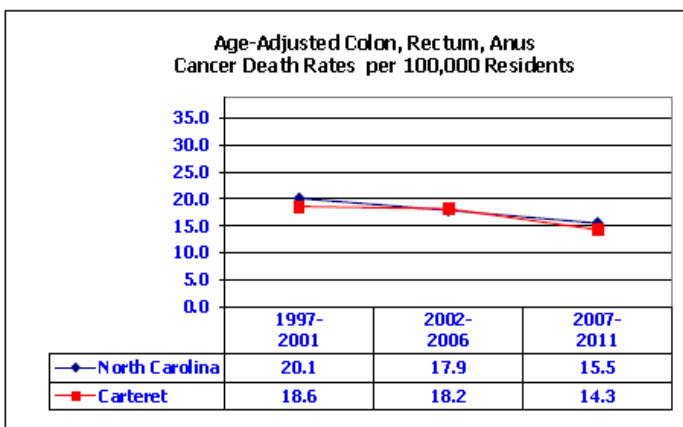
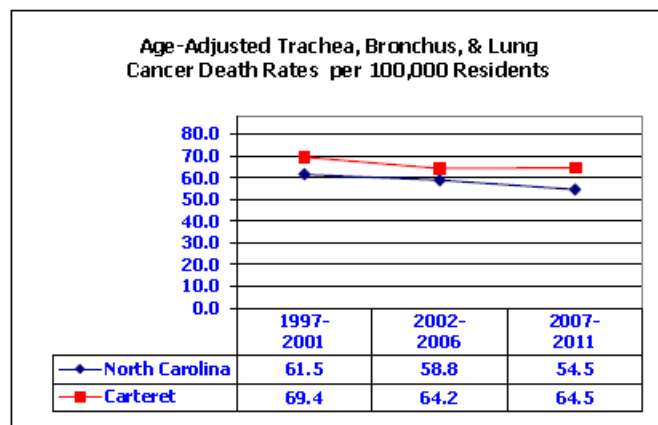
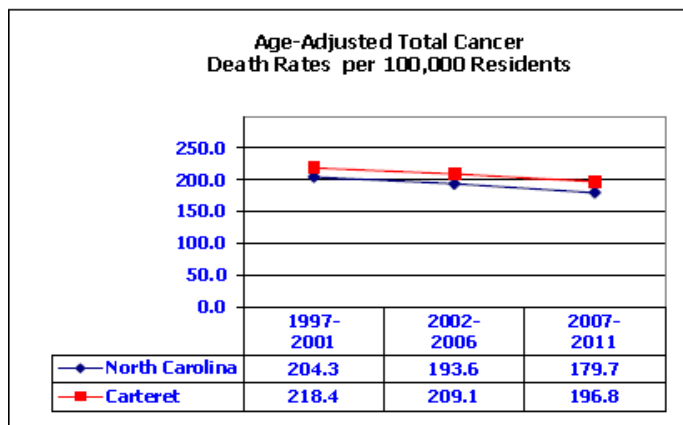
Source: State Center for Health Statistics: Leading Cause of Death <http://www.schs.state.nc.us/>

Mortality Trend Data: Age Adjusted Death Rates

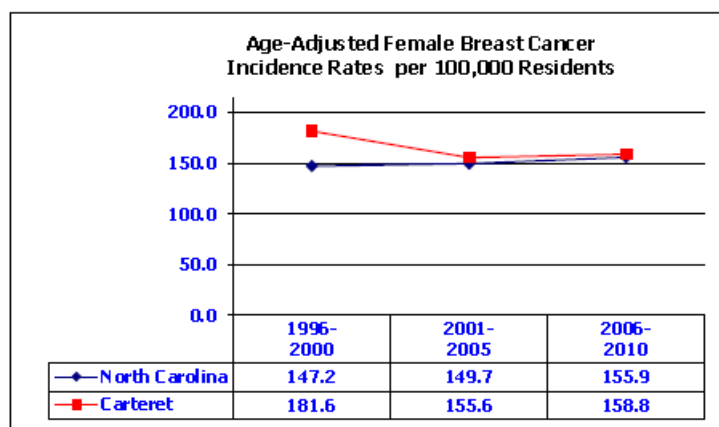
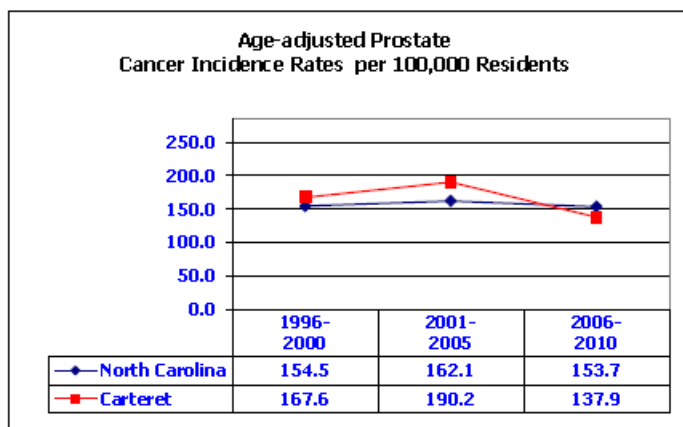


Source: State Center for Health Statistics: Leading Cause of Death <http://www.schs.state.nc.us/>

Trend Data: Age Adjusted Cancer Death Rates



Trend Data: Age Adjusted Incidence Rates Prostate and Breast Cancer



Source: State Center for Health Statistics: Leading Cause of Death <http://www.schs.state.nc.us/>

Chronic Disease

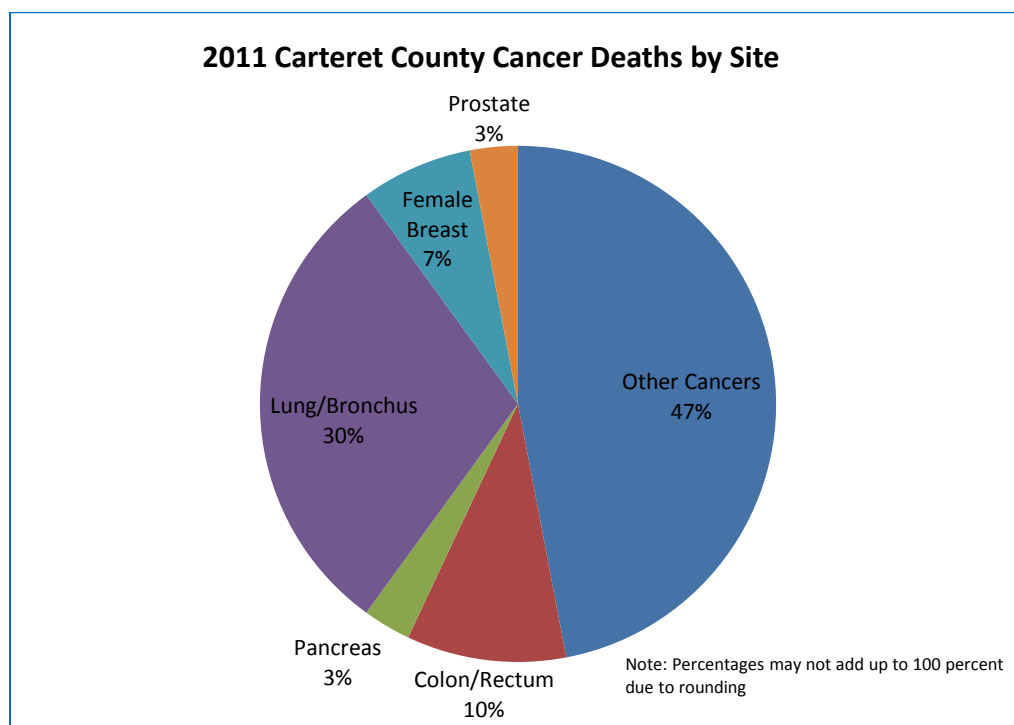
Cancer

In 2011, cancer was the second leading cause of death for all populations in the United States according to the Centers for Disease Control and Prevention (CDC), while it was the leading cause of death in North Carolina and Carteret County.¹ According to the North Carolina Central Cancer Registry, 18,201 persons in North Carolina died, and 184 persons in Carteret County died from cancer in 2011. The table below portrays the percent of cancer deaths in Carteret County compared to North Carolina cancer deaths in 2011.

2011 Percent of Cancer Deaths in Carteret County Compared to 2011 Percent of Cancer Deaths in North Carolina	
Carteret County	North Carolina
25.0%	22.8%

Source: Cancer Profiles: Carteret County June 2013, North Carolina Central Cancer Registry- State center for Health Statistics

The majority of cancer deaths occur within five sites (categories): colon/rectum, pancreas, lung/bronchus, female breast and prostate which are depicted in the graph below.



Source: Cancer profiles: Carteret County June 2013, North Carolina Central Cancer Registry- State Center for Health Statistics

¹ Centers for Disease Control and Prevention website: www.cdc.gov/nchs/fastats/deaths.htm

2007-2011, Age-Adjusted Cancer Mortality Rates by Site, Peer Counties and North Carolina (per 100,000)					
Counties	All Cancers	Colon/Rectum	Lung/Bronchus	Female Breast (incidence rate)	Prostate* (incidence rate)
Carteret	196.8	14.3	64.5	158.8	137.9
Chatham	160.4	13.0	45.0	168.9	141.6
Haywood	171.0	13.0	53.0	150.1	147.4
Moore	166.7	12.7	51.3	173.4	154.4
Stanly	181.6	14.5	58.9	143.8	140.0
North Carolina	179.7	15.5	54.5	155.9	153.7

*Prostate rates are from 2006-2010

Source: NC Department of Health and Services- County Trend Report

When analyzing the cancer death rates by site for all ages for 2007-2011, as seen on the table above, Carteret County has the highest death rate (196.8) for all cancers and lung/bronchus (64.5) compared to the state and peer counties. Carteret County demonstrates a 23% greater death rate due to all cancers as compared to Chatham County and a 9.5% greater rate when compared to North Carolina.

A majority of cancers are impacted by modifiable factors such as personal lifestyles and environmental factors, such as smoking and diet, which are preventable. However, cancers are also impacted by non-modifiable factors such as age, gender or family history of a specific cancer. Non-modifiable factors are used to aid the identification of people at high risk for developing cancers.

Prevention and early detection are two key factors in disease control and reducing the number of cancer deaths so that treatment of the disease can be effective. Some cancers, prevention is considered more beneficial than early detection. For example, lung cancer is one of the most preventable cancers. According to the 2010 Surgeon General's Report, it is estimated that more than 85 percent of lung cancers result from smoking.² Cancer can be prevented through reducing tobacco use and exposure, increasing consumption of healthier foods and physical activity, reducing the exposure to direct sunlight, and screening for early detection.

² Reports of the Surgeon General website: www.surgeongeneral.gov/library/reports

Heart Disease

Despite heart disease mortality rates declining, as observed on the chart on page 26, heart disease continues to be the second leading cause of death in Carteret County. From 2007-2011, death rates due to heart disease (198.9) have decreased slightly (206.6) since 2003-2007.⁵ Carteret County has a 10.9% higher heart disease death rate when compared to North Carolina and 46% higher than that of Moore County.³

2007-2011 Age-Adjusted Heart Disease Death Rates, Peer Counties and North Carolina (per 100,000)	
Carteret	198.9
Chatham	163.2
Haywood	194.8
Moore	136.2
Stanly	214.7
North Carolina	179.3

Like cancer, heart disease is impacted by modifiable factors such as personal lifestyles and environmental factors, such as smoking and weight management. However, heart disease is also impacted by non-modifiable factors such as age, gender and heredity including race.

According to the American Heart Association, it is estimated that a smoker is 2-4 times more likely to develop coronary heart disease than that of non-smoker.⁴ Exposure to secondhand smoke has increased the risk for nonsmokers to develop heart disease. Heart Disease can be prevented through reducing tobacco use and exposure, increasing consumption of fruits and vegetables, increase daily physical activity, controlling high blood cholesterol and blood pressure.

³North Carolina Community health Assessment Process: calculations worksheet phase 3 <http://publichealth.nc.gov/lhd/cha/about.htm>

⁴American Heart Association website: www.heart.org

Cerebrovascular Disease (Stroke)

Cerebrovascular disease or stroke death rates are declining as depicted on the chart on page 26; however stroke continues to be the third leading cause of death in Carteret County. During 2007-2011, the total death rates from stroke (43.6) decreased for all ages (52.4) when compared to 2003-2007.⁵

Carteret County 2008-2012 Age-Adjusted Death Rates, Per 100,000 Populations																
	White, non-Hispanic		African American, non-Hispanic		American Indian, non-Hispanic		Other Races, non-Hispanic		Hispanic		Male		Female		Overall	
Cause of Death:	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
Cerebrovascular Disease	164	37.9	11	N/A	0	N/A	0	N/A	2	N/A	72	37.3	105	41.3	177	39.0

Source: North Carolina Division of Public Health, State Center for Health Statistics. <http://www.schs.state.nc.us/SCHS/data/databook>.

According to the NC State Center for Health Statistics, women of all ages continue to have the highest prevalence of stroke in Carteret County.⁶ During 2007-2011, Carteret County had a 5.2% decrease in stroke death rates compared to North Carolina.³

Chronic Lower Respiratory Disease

Chronic Lower Respiratory disease or chronic lung disease, COPD is the fourth leading cause of death for all ages in Carteret County. From 2007-2011, death rates due to COPD (39.3) have decreased slightly (40.5) since 2003-2007.⁵ COPD death rates were higher in males (50.7) during 2005-2009 compared to males (40.2) from 2008-2012.

Carteret County 2008-2012 Age-Adjusted Death Rates, Per 100,000 Populations																
	White, non-Hispanic		African American, non-Hispanic		American Indian, non-Hispanic		Other Races, non-Hispanic		Hispanic		Male		Female		Overall	
Cause of Death:	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
Chronic Lower Respiratory Diseases	182	40.3	4	N/A	0	N/A	1	N/A	0	N/A	85	40.2	102	38.2	187	39.1

Source: North Carolina Division of Public Health, State Center for Health Statistics. <http://www.schs.state.nc.us/SCHS/data/databook>.

⁵ Carteret County Health Department, Community Health Assessment 2009 and Community Health Assessment 2013

⁶ North Carolina Division of Public Health, State Center for Health Statistics. NC Resident Race and Sex-Specific Age-Adjusted Death Rate. Website: <http://www.schs.state.nc.us/SCHS/data/databook>

Unintentional Injuries

Unintentional injuries are the fifth leading cause of death for all ages in Carteret County. Carteret County has demonstrated a slight decrease in death from unintentional injuries. However, it continues to be a leading cause of death among all individuals. Death rates for unintentional injuries (40.6 per 100,000 populations) for 2003-2007, have decreased by 4.9 % in 2007-2011 to (38.6 per 100,000 per populations). The following two charts illustrate the leading causes of injury hospitalizations and injury Emergency Department visits by age group for Carteret County during 2007-2009.

Leading Causes of Injury Hospitalization by Age Group, Carteret County (2007-2009)

All age groups	Ages: 0-14	Ages :15-34	Ages: 35-64
Fall (unintentional)	Poisoning (unintentional)	Poisoning (self-inflicted)	Fall (unintentional)
Poisoning (self-inflicted)	Fall (unintentional)	MVT (unintentional)	Poisoning (self-inflicted)
MVT (unintentional)	Struck (unintentional)	Fall (unintentional)	MVT (unintentional)
Unspecified (unintentional)	Transport (unintentional)	Poisoning (unintentional)	Poisoning (unintentional)
Poisoning (unintentional)	MVT (unintentional)	Other spec/class (unintentional)	Unspecified (unintentional)
Other spec/class (unintentional)	Fire/Burn, (unintentional)	Other	Other
Other			

(Source: NC Department of Health and Human Services)

<http://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCountyallages2007-2009c.pdf>

Leading Causes of Injury Emergency Department Visits by Age Group, Carteret County (2007-2009)

All age groups	Ages: 0-14	Ages: 15-34	Ages: 35-64
Fall (unintentional)	Fall (unintentional)	Fall (unintentional)	Fall (unintentional)
Overexertion (unintentional)	Struck (unintentional)	Overexertion (unintentional)	Overexertion (unintentional)
Struck (unintentional)	Natural/Environ (unintentional)	Struck (unintentional)	Struck (unintentional)
MVT (unintentional)	Cut/pierce (unintentional)	MVT (unintentional)	MVT (unintentional)
Unspecified (unintentional)	Other spec/class (unintentional)	Unspecified (unintentional)	Unspecified (unintentional)
Other	Other (unintentional)	Other	Other

(Source: NC Department of Health and Human Services)

<http://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Top5TablesByCountyallages2007-2009c.pdf>

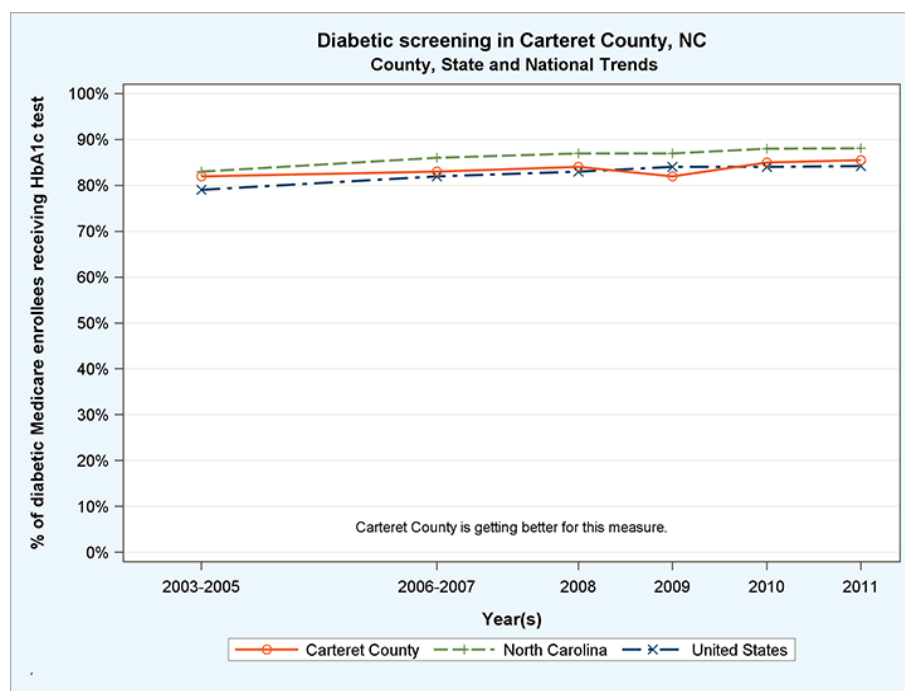
Diabetes Mellitus

Diabetes Mellitus is the 7th leading cause of death in North Carolina and in Carteret County. Death rates due to Diabetes have had a slight (0.1 %) increase from years 2003 to 2011. Carteret County (17.2) death rate of diabetes is 22% lower when compared to North Carolina (22.0). Carteret County has the third lowest death rate when compared to its peer counties as depicted in the graph below.

2007-2011 Age-Adjusted Diabetes Death Rates, Peer Counties and North Carolina (per 100,000)	
Carteret	17.2
Chatham	25.0
Haywood	14.8
Moore	14.4
Stanly	23.6
North Carolina	22.0

According to the North Carolina State Center for Health Statistics, males had the highest death rates (21.6 per 100,000 populations) of Diabetes Mellitus in Carteret County from 2008-2012.⁷

The hemoglobin A1c test, also called HbA1c, glycated hemoglobin test is an important blood test performed to determine how well an individual's diabetes is controlled. According to the Robert Wood Johnson Foundation County Rankings, Carteret County is improving in diabetic screenings as depicted in the graph below.



Source: Robert Wood Johnson Foundation County Health Rankings.

⁷North Carolina Division of Public Health, State Center for Health Statistics. NC Resident Race and Sex-Specific Age-Adjusted Death Rate. Website: <http://www.schs.state.nc.us/SCHS/data/databook>.

⁸Robert Wood Johnson Foundation County Health Rankings. Website: <http://www.countyhealthrankings.org/app/north-carolina/2014/rankings/carteret/county/factors/overall/snapshot>

An analysis of the Behavior Risk Factor Surveillance System (BRFSS) reveals that:

- In 2012, 11.1% adults in Eastern North Carolina (ENC) reported being told they had diabetes compared to 11.7% adults in 2011.
- Over 1/3 (33.8%) ENC adults were between 30-50 years of age when they were told they had Diabetes, similar to that reported in 2011 (33.6%).
- There has been a slight decrease from 2011 (54.7%) to 2012 (51.8%) of ENC adults who reported they have taken a diabetes course or class.
- In 2012, 73% of adults with diabetes in ENC reported having a hemoglobin A1C test performed two to four times in a 12 month period, compared to 71.9% in 2011.

Leading Causes of Hospitalization

The following table portrays the top seven leading causes of hospitalizations of residents in Carteret County and North Carolina for 2012. The leading cause for both Carteret County and North Carolina is Cardiovascular and Circulatory Disease related problems. Even though heart disease is the second leading cause of death in Carteret County, it is the most prevalent health problem contributing to inpatient hospital utilization.

Carteret County			North Carolina		
Rank	# of Cases	Diagnosis	Rank	# of Cases	Diagnosis
1	1,657	Cardiovascular and Circulatory Disease	1	158,196	Cardiovascular and Circulatory Disease
2	1,193	Heart Disease	2	121,227	Pregnancy and Childbirth
3	779	Digestive System Diseases	3	104,458	Heart Disease
4	645	Respiratory Disease	4	96,814	Respiratory Disease
5	621	Pregnancy and Childbirth	5	90,595	Digestive System Diseases
6	602	Injuries and Poisoning	6	85,397	Other Diagnosis (incl. Mental Disorders)
7	570	Musculoskeletal System Diseases	7	78,529	Injuries and Poisoning

Source: NC State Center for Health Statistics

Asthma

Asthma, a respiratory disease, is the leading chronic illness among school aged children. According to North Carolina Annual School Health Services Report 2011-2012, 105,542 students are known to school nurses as having asthma.

The North Carolina Hospital Discharge data- Primary Diagnosis of Asthma, Carteret County's rate of 232.2 per 100,000 populations is significantly higher than North Carolina's rate of 163.7 per 100,000 for youth ages 0-14 in 2012.

2012 Asthma Hospitalizations Rate, Age 0-14 (Per 100,000 populations)	
Carteret	232.2
Chatham	137.2
Haywood	110.1
Moore	125.4
Stanly	72.3
North Carolina	163.7

As the table to the left demonstrates, Carteret County has the highest rate of hospitalizations due to asthma in children ages 0 to 14 years of age compared to peer counties and NC.

Infant and Child Death, 2007-2011

The leading causes of infant and child death for Carteret County include:

1. Birth Defects
2. Other birth-related conditions
3. SIDS, Sudden Infant Death Syndrome
4. Illnesses
5. Unintentional injuries (including motor vehicle injuries and drowning)

From 2007-2011, 28 children from the ages of less than 1 year old to 17 years old died in Carteret County. Overall, Carteret County's infant and child death rate is significantly lower than the state's rates.

Throughout the year, the Carteret County Child Fatality Prevention Team reviews incident reports, medical records, and files related to child deaths in Carteret County. The purpose of this review is to understand the causes of child deaths, identify deficiencies in the services delivered to children and families by public agencies, and to assess, recommend and implement changes that will prevent future child deaths. A multidisciplinary team is pulled together to review this information and identify if anything could have prevented the child's death. The purpose of this team is also to promote and support safe and healthy development of children in Carteret County. For more information on the Child Fatality Prevention Team, contact the Carteret County Health Department at (252) 728-8550.

Source: State Center for Health Statistics: <http://www.schs.state.nc.us/>

Communicable Disease

Communicable Diseases and/or illnesses that are considered to be a risk to public health are reported to North Carolina. The state requires over seventy- one diseases to be reported including but are not limited to the ones identified in this section of the Community Health Assessment.

Carteret County Health Department is responsible to investigate disease and/or illness outbreaks and implement control measures to minimize further exposure and transmission of disease.

Table 1.1 indicates the number of newly reported cases by disease in 2013. Salmonellosis was the most prevalent disease, as shown in the table, but no cases were linked to outbreaks. Lyme disease and Hepatitis B were also diagnosed more often in 2013 than other diseases.

Communicable Diseases excluding Sexually Transmitted Disease (STDs) have decreased from 95 cases in 2012 to 85 cases in 2013.

*Source: Carteret County Health
Department, North Carolina
Electronic Disease Surveillance System*

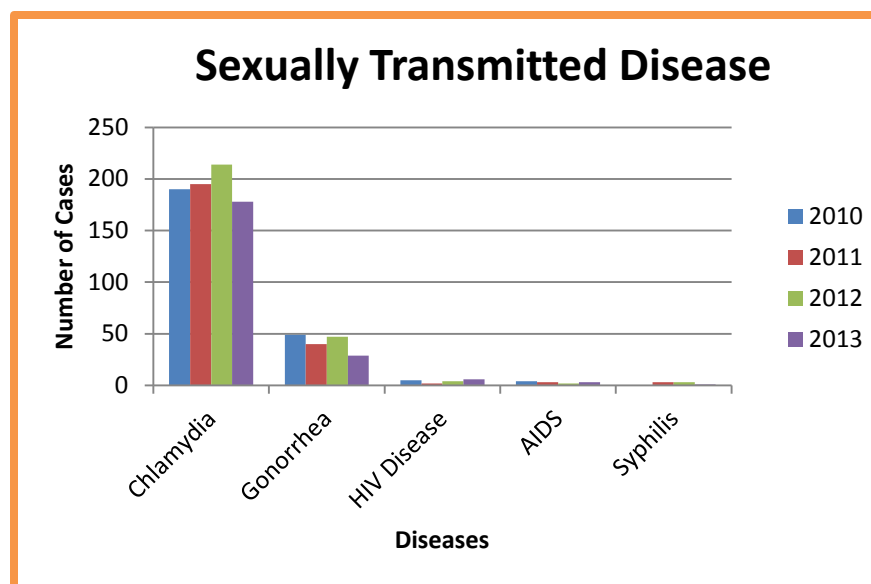
Table 1.1 2013 Communicable Disease Report	
Disease	Total Cases*
Campylobacter	6
Chancroid	1
Creutzfeldt-Jakob	1
Hepatitis A	1
Hepatitis B (chronic/acute/perinatally acquired)	13
Hepatitis C	5
Lyme Disease	14
Malaria	1
Pneumococcal Meningitis	1
Invasive Disease Meningitis	2
Mumps	1
Pertussis	3
Rocky Mountain Spotted Fever	3
Rubella	1
Salmonellosis	26
Shigellosis	1
Tetanus	1
Tuberculosis	3
Vibrio, other than cholera/vulnificus	1
Total	85

Sexually Transmitted Diseases (STDs)

Chlamydia

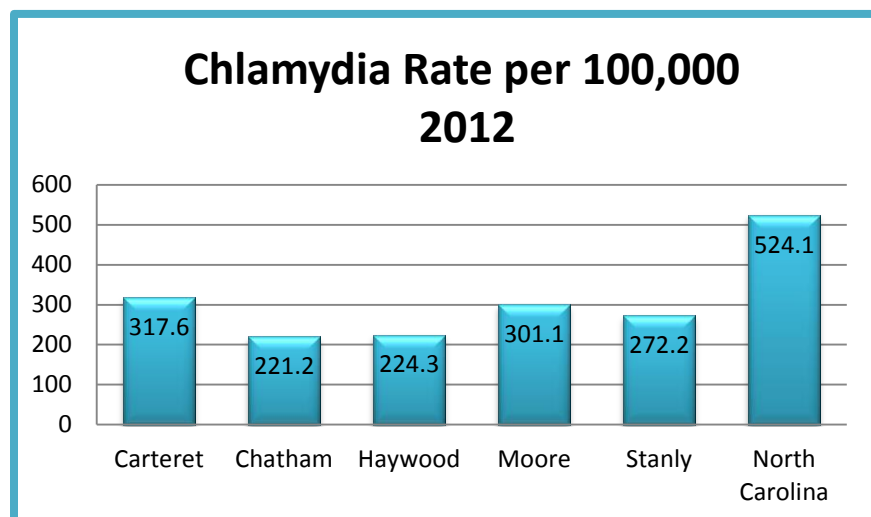
Based upon reportable cases during 2010-2013, Chlamydia continues to be the most prevalent sexually transmitted disease (STD) in Carteret County, as shown in the graph below. It is important to note that Chlamydial cases reported represent persons who have a laboratory confirmed chlamydial infection. Chlamydia is often asymptomatic (without symptoms) in both female and male cases, and most cases are detected through clinical screenings.⁹

⁹ NC Division of Public Health, Communicable Disease Branch. 2012 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf>



Source: Carteret County Health Department, North Carolina Electronic Disease Surveillance

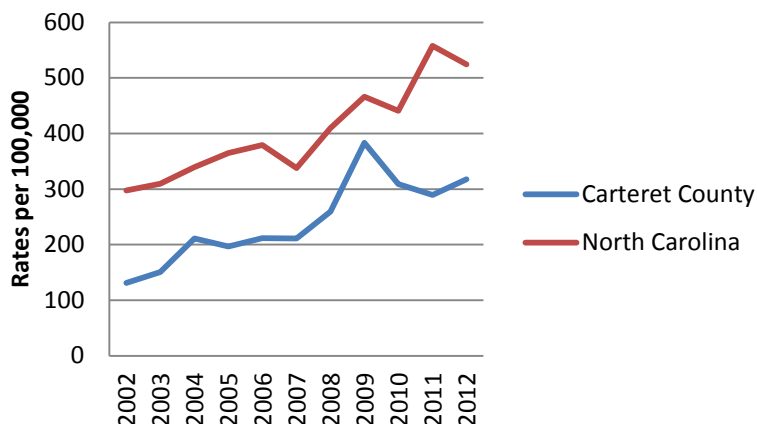
Amongst peer counties, Carteret County has the highest rate (317.6) of Chlamydia cases but still is lower than North Carolina's rate (524.1) for 2012. For both males and females, chlamydia cases were more prevalent in 20-24 year olds followed by 15-19 year olds in North Carolina.¹⁰



Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

¹⁰ NC Division of Public Health, Communicable Disease Branch. 2012 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf>

Chlamydia Cases: 10 Year Trend



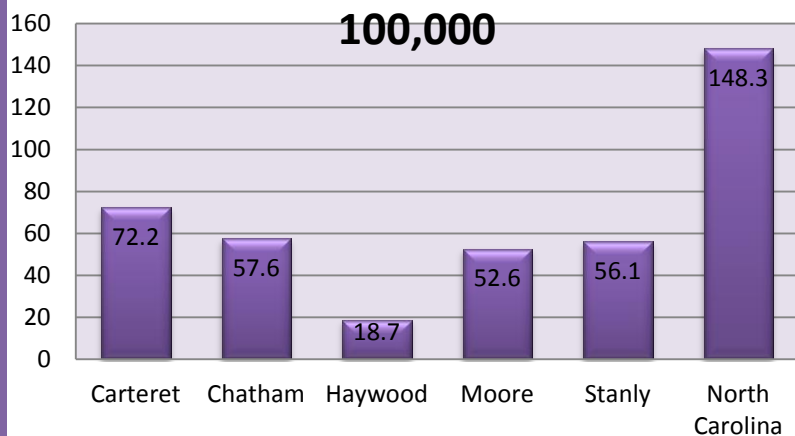
During 2009-2011, Carteret County saw a decline in Chlamydia cases, while the state has seen a continuous increase in cases as depicted in the graph to the left. However, even with a slight decline in 2009-2011, Carteret County still has seen an increase in cases over a ten year span from 2002-2012.

Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

Gonorrhea

Gonorrhea cases were the second most prevalent STD in Carteret County during 2010-2013. When compared to peer counties, Carteret County has the highest rate (72.2) of Gonorrhea followed by Chatham County (57.6) with the second highest. However, Carteret County's rate is still lower than the rate for North Carolina (148.3).

2012 Gonorrhea Rate per 100,000



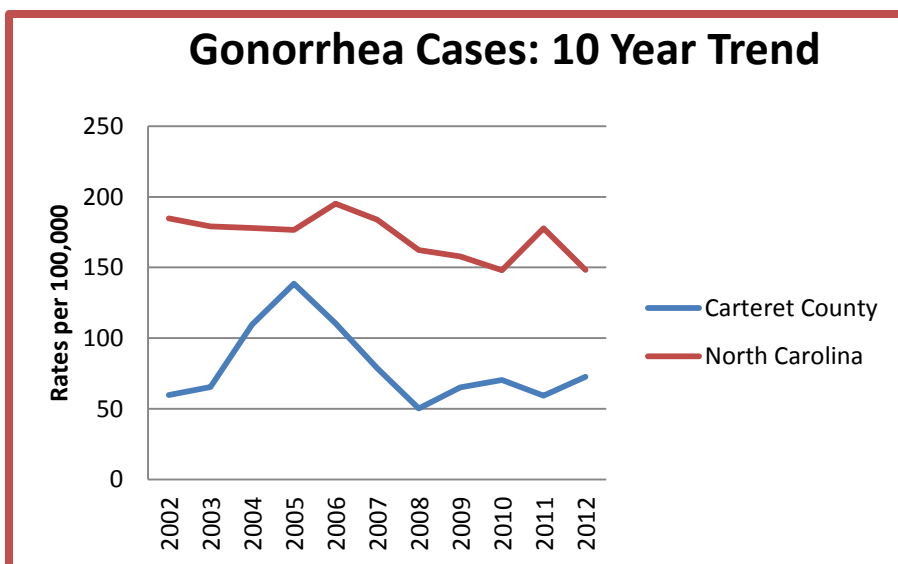
Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

¹¹ NC Division of Public Health, Communicable Disease Branch. 2005 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std05rpt.pdf>

¹² NC Division of Public Health, Communicable Disease Branch. 2010 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std10rpt.pdf>

¹³ NC Division of Public Health, Communicable Disease Branch. 2012 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf>

The graph below depicts the 10 year trend of Gonorrhea cases in Carteret County compared to North Carolina. In Carteret County and North Carolina, a drop in cases was seen from 2005 to 2008, while the state has seen a steady decrease in cases. During 2008 to 2012, Carteret County saw a slight increase in cases.



Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

HIV Disease/AIDS

In the 2012 North Carolina Surveillance Report, the three year (2010-2012) average rate of HIV disease in Carteret County was 4.0 per 100,000 populations, which is lower than the state rate of 15.1. Based upon the average rate for 2010-2012, Carteret County is ranked Tied-75th (out of 100 counties- 1 having the highest rate to 100 having the lowest). For AIDS cases, the county is ranked 61st in the state with an average rate of 4.0, lower than the state rate of 8.3.

HIV Cases/Ranks NC 2010-2012 (per 100,000)		
County/State	3 Yr. Avg. Rate (2010-2012)	Rank
North Carolina	15.1	--
Stanly	7.7	51st
Moore	7.1	T-54 th
Chatham	4.7	74 th
Carteret	4.0	T-75 th
Haywood	2.3	88 th

Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

¹⁴ NC Division of Public Health, Communicable Disease Branch. 2012 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf>

Amongst peer counties, Carteret County has the second lowest three year average rate (4.0) of HIV Disease cases with Haywood (2.3) be the lowest. Carteret County has the third lowest three year average rate (4.0) of AIDS cases compared to peer counties.

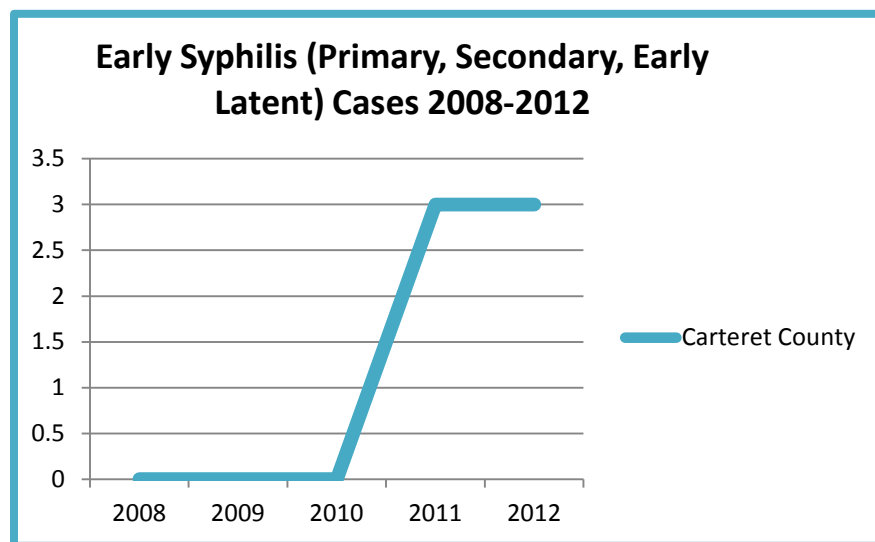
AIDS Cases/Ranks NC 2010-2012 (per 100,000)		
County/State	3 Yr. Avg. Rate (2010-2012)	Rank
North Carolina	8.3	--
Moore	7.7	T-29th
Chatham	4.2	T-58th
Carteret	4.0	61st
Haywood	2.8	T-72th
Stanly	2.7	75th

Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

Syphilis

Syphilis another STD is classified by stage of infection (primary, secondary) which is reported through a combination of laboratory tests and patient interviews. This is also the only STD that eastern NC is not the leader in infection rates; the piedmont region of NC currently has the highest rates.

In 2010, Carteret County reported no cases of Syphilis but in 2011 that number rose to three cases reported and stabilized there in 2012.

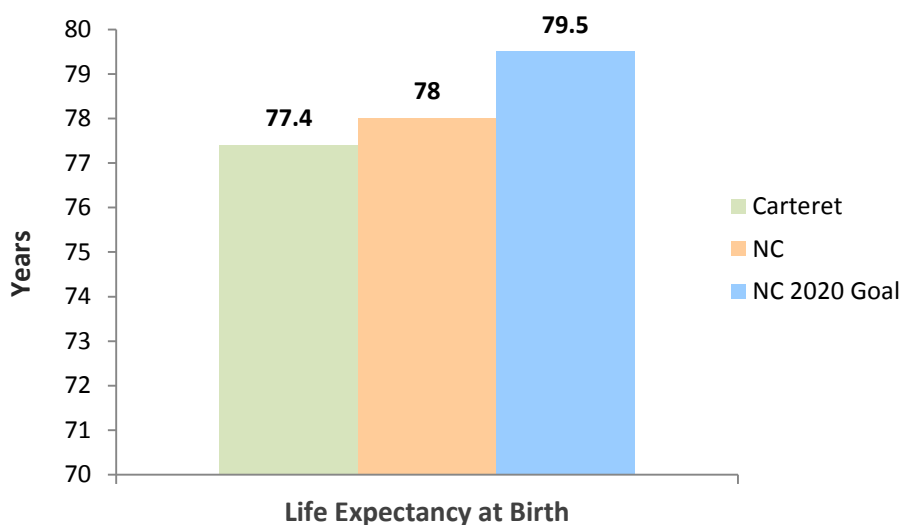


Source: North Carolina Division of Public Health, Communicable Disease Branch. HIV/STD Surveillance Report.

¹⁵ NC Division of Public Health, Communicable Disease Branch. 2012 HIV/STD Surveillance Report. Available at <http://epi.publichealth.nc.gov/cd/stds/figures/std12rpt.pdf>

Life Expectancy

Life expectancy is the average number of additional years that someone at a given age would be expected to live if current mortality conditions remained constant throughout their lifetime. This measure is also beneficial because it provides a summary measure for population health. The chart below represents life expectancy at birth for Carteret County, the State of North Carolina, and also includes the Healthy NC 2020 Goal which is average life expectancy the state would like to reach.



Life expectancy disparities persist between male and female genders and different races. The average life expectancy from 2009- 2011 for a Carteret County male was 74.9 years, and Carteret County female was 80.5 years.

The life expectancy from 2009-2011 at birth for an African American person in Carteret County is 78.1 years and for a white person it is 77.2 years. This is much different than the state in that the average life expectancy for African Americans in North Carolina is 75.3 years, and for 78.6 for whites.

CHAPTER 4: HEALTH BEHAVIORS

Self-Reported Data

This section provides a comparison of answers between the NC Behavioral Risk Factor Surveillance System data, as well as the 2013 Community Opinion Survey data from Carteret County residents.

North Carolina Behavioral Risk Factor Surveillance System (BRFSS)

The BRFSS is a random telephone survey of state residents aged 18 and older in households with telephones. Developed in the early 1980s by the Centers for Disease Control and Prevention (CDC) in collaboration with state health departments, this survey is currently conducted throughout the U.S. including U.S. territories. The NC Division of Public Health has participated in the BRFSS since 1987. Through BRFSS, information is collected in a routine, standardized manner at the state level on a variety of health behaviors and preventive health practices related to the leading causes of death and disability such as cardiovascular disease, cancer, diabetes and injuries. North Carolina data is grouped into three regions; Eastern, Piedmont, and Western.

Health Status

2012 BRFSS Survey Results

“Would you say that in general your health is Excellent, Very Good, Good, Poor, or Fair?”

Approximately **79.8%** of the population in **Eastern North Carolina said their health was Excellent, Very Good, or Good.

NC BRFSS											
	Total Respond.	Excellent		Very Good		Good		Poor		Fair	
		N	%	N	%	N	%	N	%	N	%
North Carolina	11,844	1,998	18.7	3,554	31.4	3,658	30.6	1,806	14.1	828	5.2
-Eastern NC	3,898	607	17.2	1,123	31.4	1,250	31.2	599	14.3	319	5.9
GENDER											
Male	1,493	243	17.2	442	32.5	461	29.7	221	14.8	126	5.8
Female	2,405	364	17.2	681	30.3	789	32.5	378	13.9	193	6.0
RACE											
White	2,435	430	18.3	776	33.3	734	30.7	316	11.8	179	5.9
African American	869	108	15.5	214	29.3	315	32.9	163	16.7	69	5.6
Other minorities	560	64	14.7	132	27.4	189	29.1	110	22.9	65	5.9

****Eastern North Carolina:** Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Harnett, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson counties.

Community Opinion Survey Results

Of those who participated in the Community Opinion Survey, **84%** of the respondents said their health was Excellent, Very Good, or Good

Self-Reported Data

Overweight and Obese

2012 BRFSS Survey Results

Body Mass Index (BMI) Grouping: Approximately 67.8% of the population in **Eastern North Carolina is either overweight or obese.

	Total Respond.^	Underweight			Recommended Range			Overweight			Obese		
		N	%	C.I.(95%)	N	%	C.I.(95%)	N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	11,113	188	1.8	1.4- 2.2	3,544	32.4	31.2-33.6	4,012	36.2	35.1-37.4	3,369	29.6	28.5-30.7
-Eastern NC	3,681	50	1.5	1.0- 2.1	1,085	30.8	28.8-32.8	1,344	36.1	34.1-38.1	1,202	31.7	29.8-33.7
GENDER													
Male	1,465	***	***	***	378	27.8	24.8-30.9	611	40.4	37.3-43.7	464	30.6	27.7-33.7
Female	2,216	38	1.7	1.1- 2.5	707	33.8	31.3-36.5	733	31.7	29.2-34.3	738	32.8	30.3-35.4
RACE													
White	2,330	37	1.6	1.0- 2.6	777	33.4	31.0-35.9	895	37.9	35.4-40.4	621	27.1	24.9-29.4
African American	816	***	***	***	164	22.3	18.6-26.6	273	33.3	29.1-37.7	372	43.4	39.0-47.9
Other minorities	508	***	***	***	137	36.3	29.5-43.7	169	32.2	26.2-38.9	197	30.4	24.6-36.9

****Eastern North Carolina:** Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Harnett, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson counties.

Community Opinion Survey

“Have you ever been told by a doctor, nurse, or other health professional that you have any of the health conditions?” Of those that participated in the survey, 41.3% of the respondents answered “yes” to being overweight or obese. Depression or anxiety, high blood pressure, and high cholesterol were among the other most common health conditions.

- | | |
|------------------------------------|-------|
| a. Asthma | 12.4% |
| b. Depression or anxiety | 30.7% |
| c. High blood pressure | 36.6% |
| d. High cholesterol | 31.8% |
| e. Diabetes (not during pregnancy) | 14.2% |
| f. Osteoporosis | 7.7% |
| g. Overweight/Obesity | 41.3% |
| h. Angina/ heart disease | 9.1% |
| i. Cancer | 10.4% |
| j. Addiction | 3.1% |
| k. COPD/Lung Disease | 6.2% |

Tobacco Use

Current Smoker

2012 BRFSS Survey Results

Current smoker includes anyone who smoke every day, as well as individuals who smoke some days, including social settings. When asked about tobacco use, approximately 22.2% of population in **Eastern NC are current smokers.

	Total Respond.^	Smoke everyday			Smoke some days			Former smoker			Never smoked		
		N	%	C.I.(95%)	N	%	C.I.(95%)	N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	11,727	1,544	14.8	14.0-15.7	610	6.1	5.5- 6.7	3,366	25.5	24.5-26.5	6,207	53.6	52.4-54.8
-Eastern NC	3,855	522	15.6	14.0-17.2	215	6.6	5.6- 7.8	1,133	26.0	24.3-27.8	1,985	51.9	49.8-54.0
GENDER													
Male	1,474	232	17.8	15.4-20.5	87	7.3	5.7- 9.4	547	31.0	28.2-34.0	608	43.9	40.6-47.2
Female	2,381	290	13.5	11.7-15.6	128	5.9	4.7- 7.4	586	21.2	19.3-23.3	1,377	59.4	56.8-61.9
RACE													
White	2,413	334	16.5	14.6-18.6	114	5.7	4.6- 7.1	813	30.1	27.9-32.4	1,152	47.6	45.1-50.2
African American	860	104	14.3	11.3-17.8	60	9.3	6.8-12.5	179	18.5	15.4-22.2	517	57.9	53.4-62.3
Other minorities	552	81	13.2	9.4-18.2	39	5.6	3.4- 9.2	137	19.8	15.2-25.4	295	61.4	54.9-67.6

****Eastern North Carolina:** Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Harnett, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson counties.

Community Opinion Survey

“Do you currently smoke cigarettes or use tobacco products, including in social settings?” Of those that participated in the survey, 18.1% of the respondents answered “yes” to using tobacco products.

And of those current users, it was asked, “Where is the first place you would go if you wanted to quit?” Of those that participated in the survey, 32.9% stated they would go to their primary care doctor however, 36.7% stated they would quit “cold turkey”.

Additionally, when asked, “In the past year, have you been exposed to secondhand smoke?” Of those that participated in the survey, 62.5% of the respondents answered “yes” to being exposed to secondhand smoke.

Substance Use/Abuse

Alcohol Use

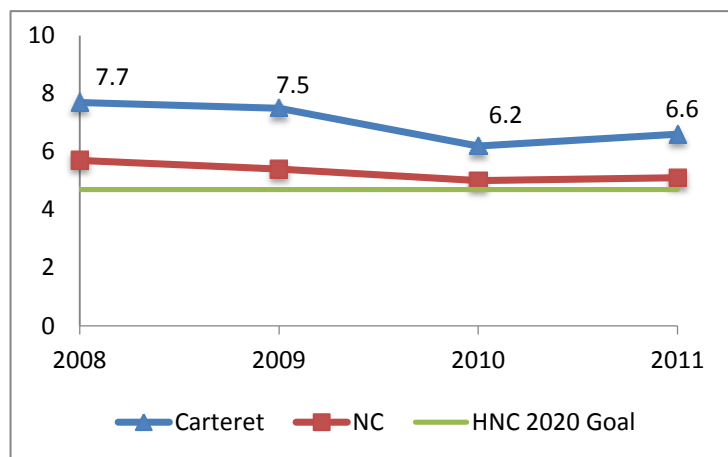
2012 BRFSS Survey Results

Binge Drinking: "Considering all types of alcoholic beverages, how many times during the past 30 days did you have [5 or more drinks for men or 4 or more drinks for women] on an occasion? " According to these results, approximately **30.2%** of the population in **Eastern NC has participated in binge drinking on one or more occasions in the past 30 days.

	Total Respond	None		Once		Twice		3-7 times		8-30 times	
		N	%	N	%	N	%	N	%	N	%
North Carolina	4,639	3,551	70.9	368	9.6	243	6.2	317	8.9	160	4.4
-Eastern NC	1,437	1,096	69.8	120	9.7	77	6.6	92	9.3	52	4.6
GENDER											
Male	709	494	63.3	70	10.8	45	6.9	62	12.6	38	6.3
Female	728	602	79.0	50	8.2	32	6.1	30	4.4	***	***
RACE											
White	1,022	793	71.0	84	10.1	51	6.1	56	7.8	38	5.1
African American	252	194	67.7	18	8.1	***	***	20	13.0	***	***
Other minorities	153	102	67.5	16	9.0	***	***	***	***	***	***

****Eastern North Carolina:** Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Harnett, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson counties.

Alcohol-Related Traffic Crash Rates: Carteret vs. NC vs. HNC 2020 Target, 2008-2011



According to data from the University of North Carolina Highway Safety Research Center, Carteret County's Rate for alcohol-related crashes is slightly higher than the state's rate. Motor vehicle injury is the leading cause of injury death in North Carolina. In 2008, one of every 18 crashes involved alcohol, and one of every 3 alcohol-related crashes was fatal." - North Carolina Institute of Medicine. Healthy North Carolina 2020: A Better State of Health. HNC 2020 Goal is 4.7.

Pride Surveys: Substance Abuse by Youth

Pride Surveys was created in 1982 by professors at Georgia State University and Western Kentucky University. Their purpose was to help local schools measure student alcohol, tobacco and other drug use. Pride Surveys now measure behavior on many crucial issues that can affect learning: family, discipline, safety, activities, gangs, and more.

The graphs and tables in this summary are compiled from data collected in Carteret County Schools using the Pride Risk and Protective Factor Questionnaire for Grades 6-12. These graphs and tables cover the areas typically of most interest for school systems. The areas covered include: demographics, prevalence of 30-day use, perception of risk, students' perception of parental disapproval of use, students' perception of peer disapproval of use and risk and protective factors. The drugs covered in this summary are cigarette/tobacco use, alcohol use, marijuana use, and prescription drugs. Marijuana is often used as a measure of illicit drug use as it is by far the most commonly used of the illicit drugs.

Carteret County Schools conducted this survey in 2008 and again in 2013 as part of an assessment and evaluation of the problem of substance use and abuse among students in 8th, 10th, and 12th grades. Funding for the survey was provided by the Coastal Coalition for Substance Abuse Prevention, a five county community coalition which covers Carteret, Craven, Jones, Onslow, and Pamlico counties. Results from this survey were shared with local taskforce members, school officials, and the community.

The following charts and graphs provide demographics of the survey as well as results by question.

2012-13 Carteret County Schools

Coastal Coalition for Substance Abuse Prevention, NC

2 Demographics

Race

Total number of students surveyed: **943**

Grade Levels

- Number of 8th grade students surveyed: **561 (59.5%)**
- Number of 10th grade students surveyed: **282 (29.9%)**
- Number of 12th grade students surveyed: **100 (10.6%)**

Sex

- Number of Male students surveyed: **465 (51.2%)**
- Number of Female students surveyed: **444 (48.8%)**

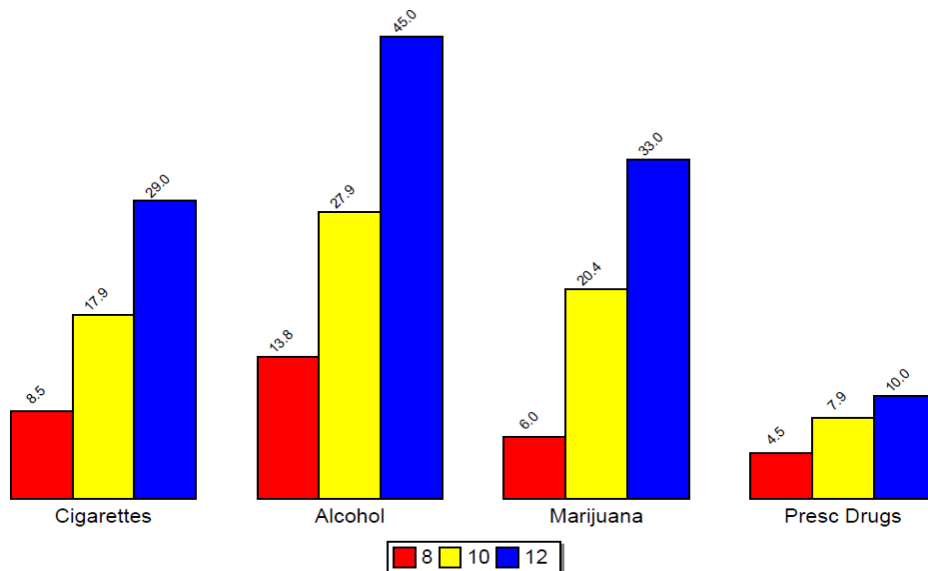
- Number of White students surveyed: **745 (80.2%)**
- Number of African American students surveyed: **66 (7.1%)**
- Number of Hispanic/Latino students surveyed: **44 (4.7%)**
- Number of Asian/Pacific Islander students surveyed: **13 (1.4%)**
- Number of Native American students surveyed: **13 (1.4%)**
- Number of Mixed Origin students surveyed: **40 (4.3%)**
- Number of Other students surveyed: **8 (0.9%)**

Data from the 2013 Pride Survey indicates past 30 day use increases with each grade. Substances are listed below ranked highest to lowest by past 30 day use.

2013	2008
1. Alcohol (28.9%)	25.3%
2. Marijuana (19.8%)	12.8%
3. Cigarettes (17.8%)	14.6%
4. Prescription Drugs (7.7%)	7.8%

Past 30 day use 2008 results listed in RED.

% Students Who Have Used Cigarettes, Alcohol, Marijuana & Prescription Drugs in the Past 30 Days



Source: Pride Surveys

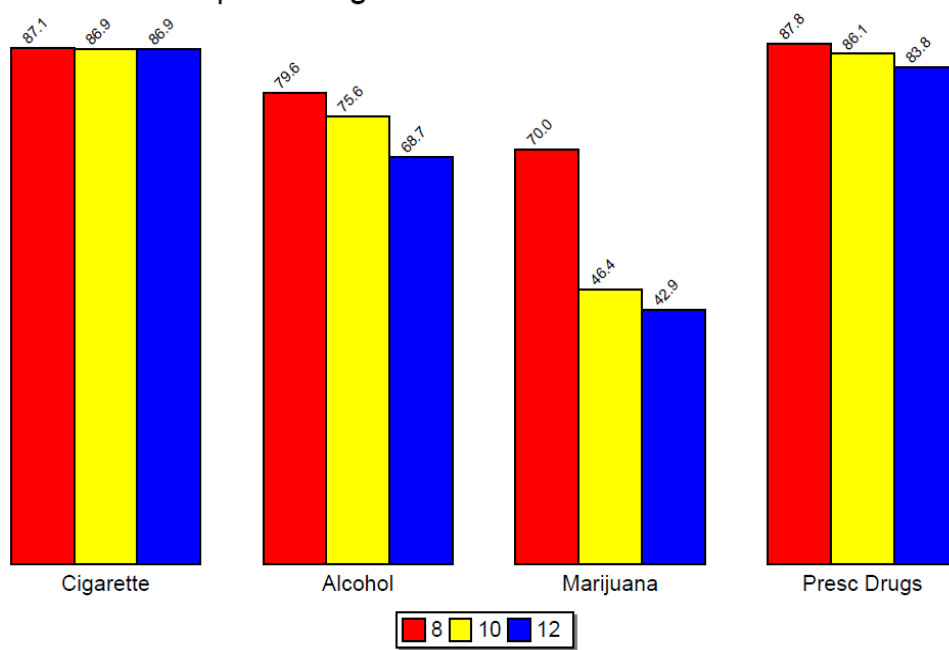
All grades perceived cigarettes and prescription drugs as having a moderate or great risk from use as shown by their higher percentages. Whereas, perceived risk associated with alcohol and marijuana use was much lower.

Marijuana had the overall lowest percentage of perceived risk.

Youth in 8th grade had the highest percentages of perceived risk for use of each of substances listed.

- Additional education on dangers and risks associated with alcohol and marijuana use may increase risk perception. Thereby, decreasing past 30 day use.

Perception of Risk of Using Cigarettes, Alcohol, Marijuana & Prescription Drugs As Moderate Risk or Great Risk



Source: Pride Surveys

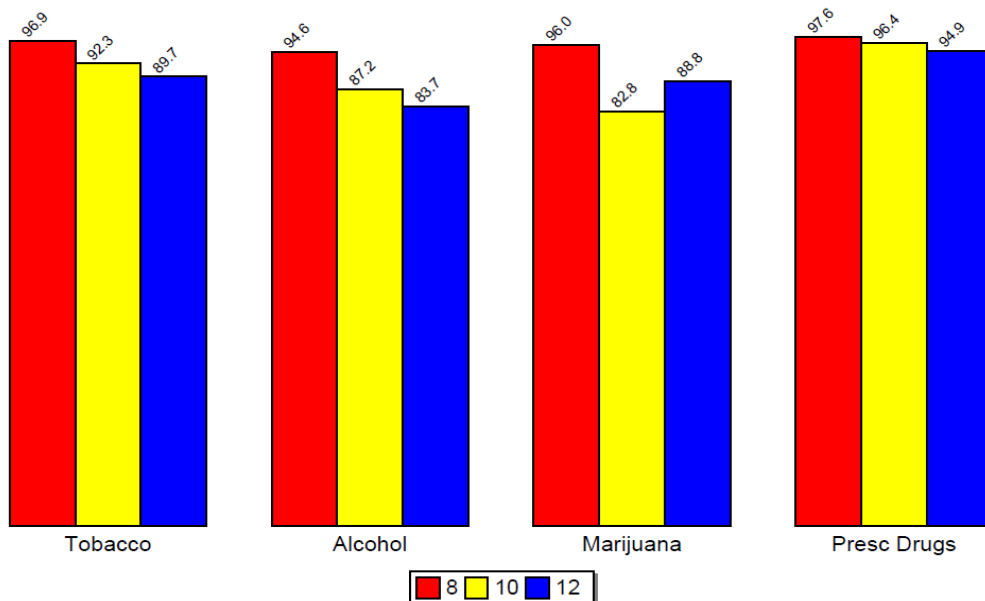
Parents Perception

Overall, perception that parents would feel it was wrong or very wrong to use marijuana and alcohol had the lowest percentage.

Again, the grade with the highest percentage of youth who felt their parents would feel it to be wrong or very wrong to use any of the substances was 8th grade.

Prescription drugs were perceived as the substance with the highest percentage of disapproval by parents.

Perception That Parents Would Feel It To Be Wrong or Very Wrong To Use Tobacco, Alcohol, Marijuana & Prescription Drugs

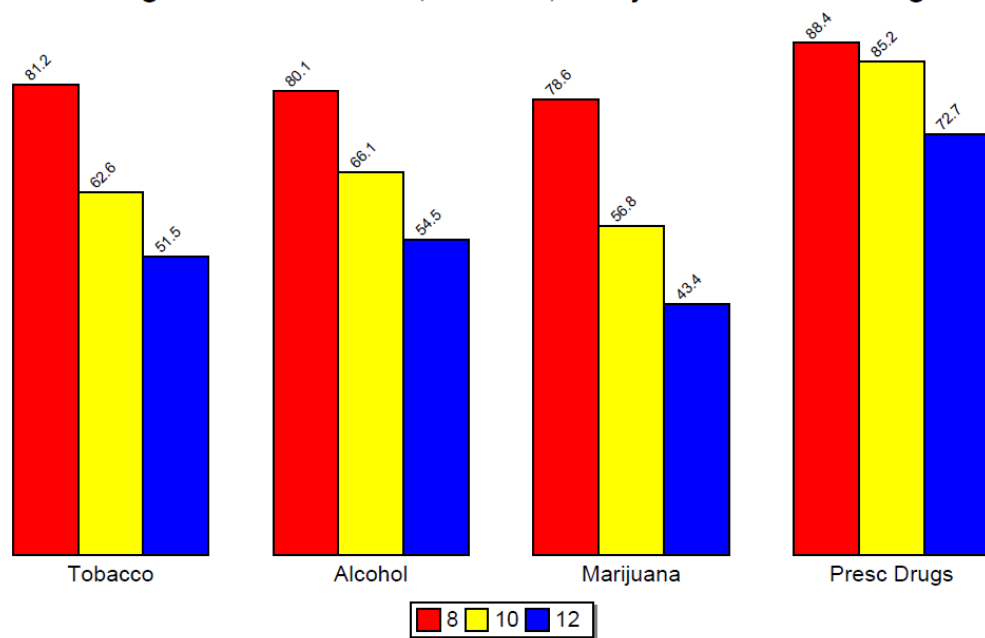


Perception that friends would feel it was wrong or very wrong to use marijuana had the lowest percentage.

The highest perception of wrong doing was for prescription drugs.

- Additional education on dangers and risks associated with marijuana use should be included in drug education with students in Middle and High School.

Perception That Friends Would Feel It To Be Wrong or Very Wrong To Use Tobacco, Alcohol, Marijuana & Presc Drugs



Perception: Ease of Obtaining

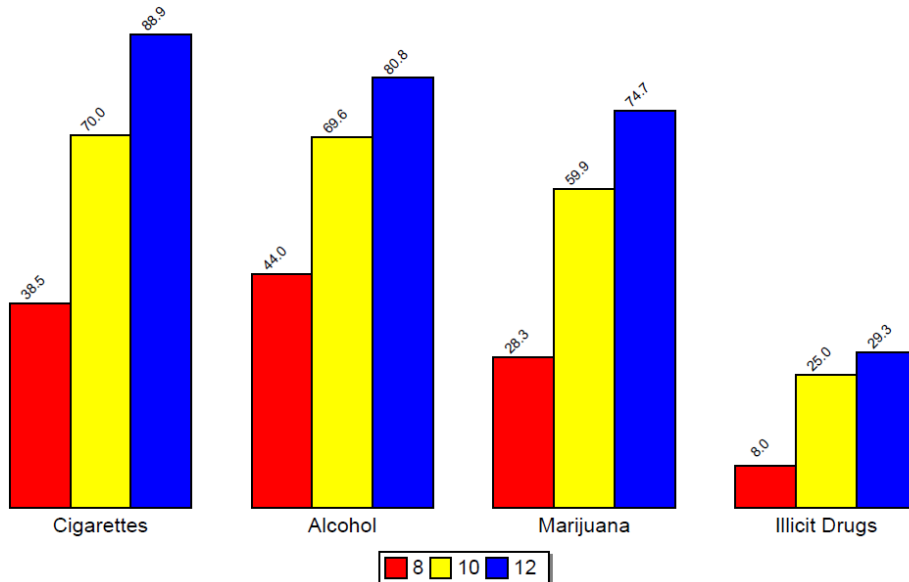
Students in 8th grade reported alcohol was the easiest substance to obtain.

For 10th grade it was cigarettes and alcohol.

For 12th grade it was cigarettes.

Illicit drugs were perceived as the substance that was most difficult to obtain. However, ease of obtaining substances and drugs increased for each grade.

Perception That Tobacco, Alcohol, Marijuana and Illicit Drugs Is Sort of Easy or Very Easy To Get

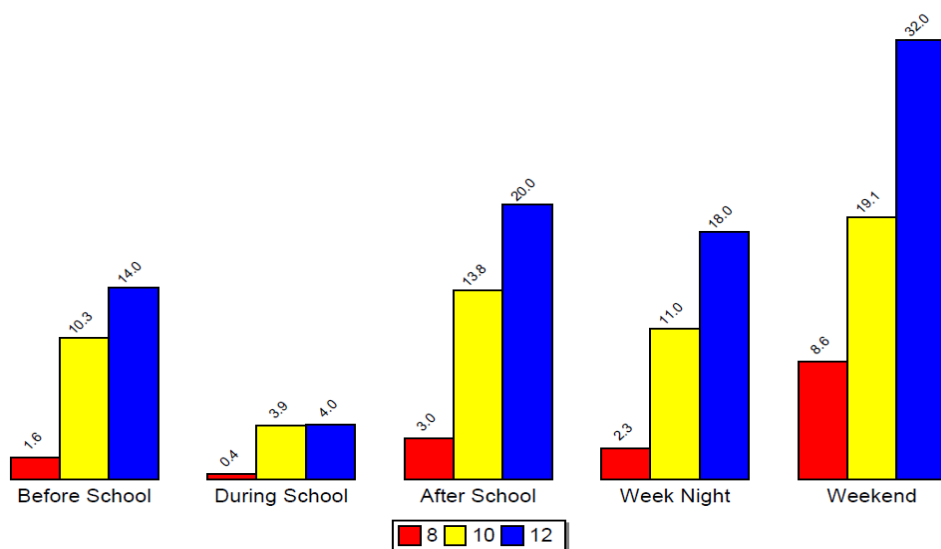


Time of Use: Tobacco

Highest use for all grades was during the weekend and after school.

- Opportunities to promote fun, low-cost, activities for teens should be developed in the community during the weekends and after school.

When Do You Use Tobacco

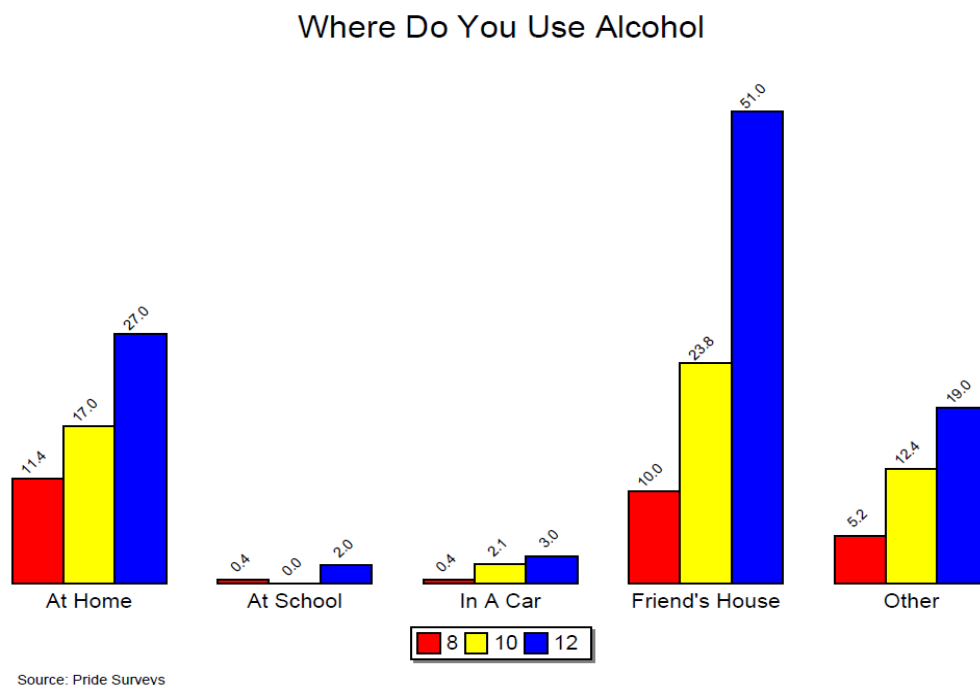


Place of Use: Alcohol

Approximately 28.9% of students stated past 30 day use of alcohol.

Highest use of alcohol for all grades was at a friend's house, followed closely by home.

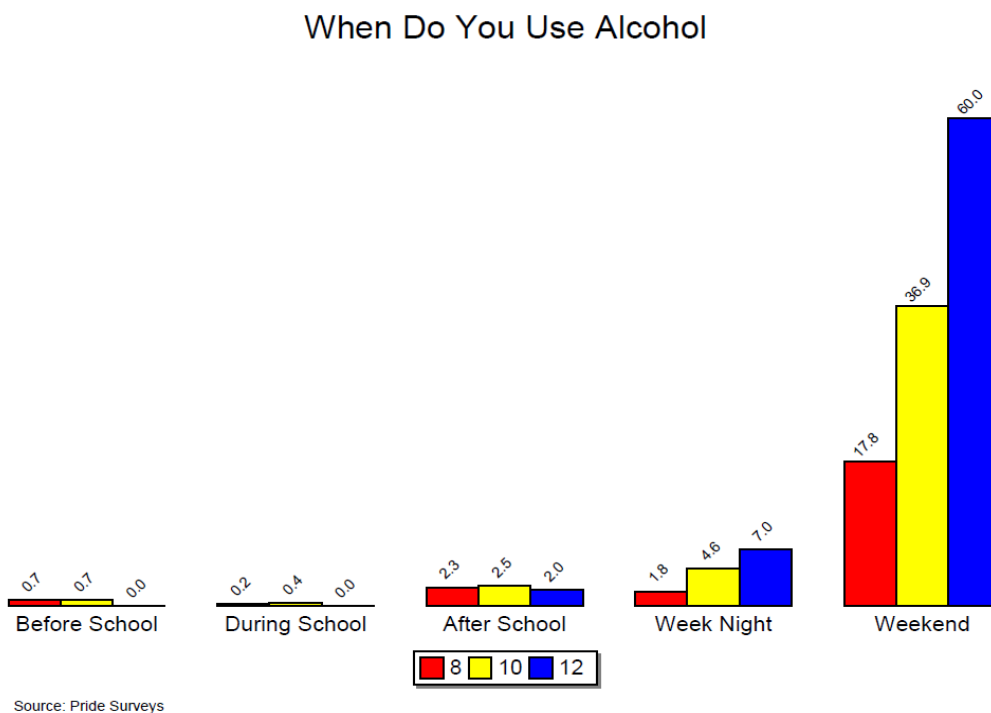
- Additional education on safe storage of alcohol, as well as ensuring a "safe home" when entertaining teens and youth should be provided to parents.



Time of Use: Alcohol

Highest use of alcohol for all grades was on the weekends.

- Additional education on safe storage of alcohol, as well as ensuring a "safe home" when entertaining teens and youth should be provided to parents.

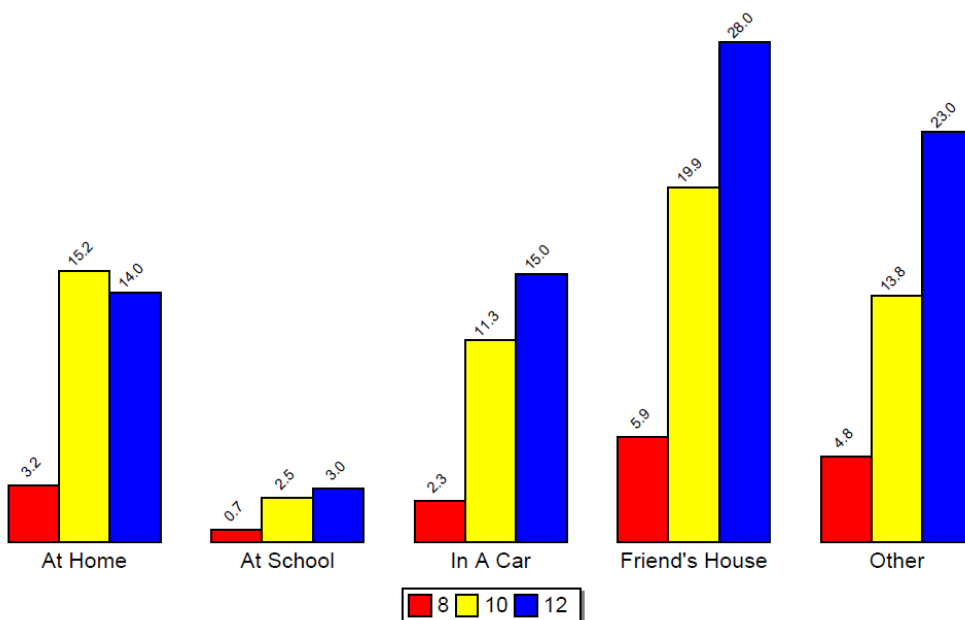


Place of Use: Marijuana

Approximately 19.8% of students stated past 30 day use of marijuana. Survey results indicate that use of marijuana for all grades was highest at a friend's house.

- Additional education on signs and trends related to illegal drug use by teens should be provided to parents.

Where Do You Use Marijuana



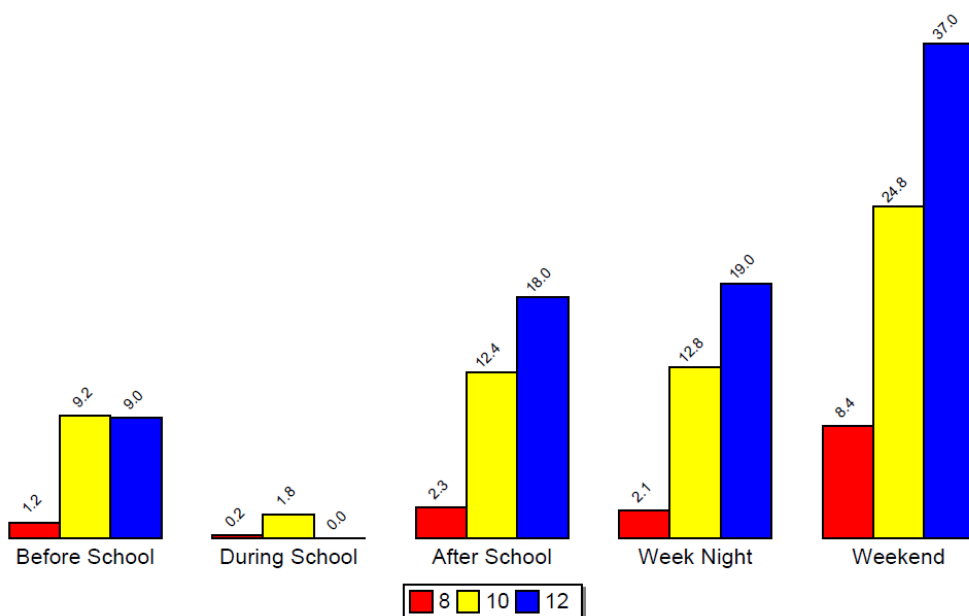
Source: Pride Surveys

Time of Use: Marijuana

Highest use of marijuana for all grades was on the weekends.

Students also report using marijuana afterschool and on week nights.

When Do You Use Marijuana

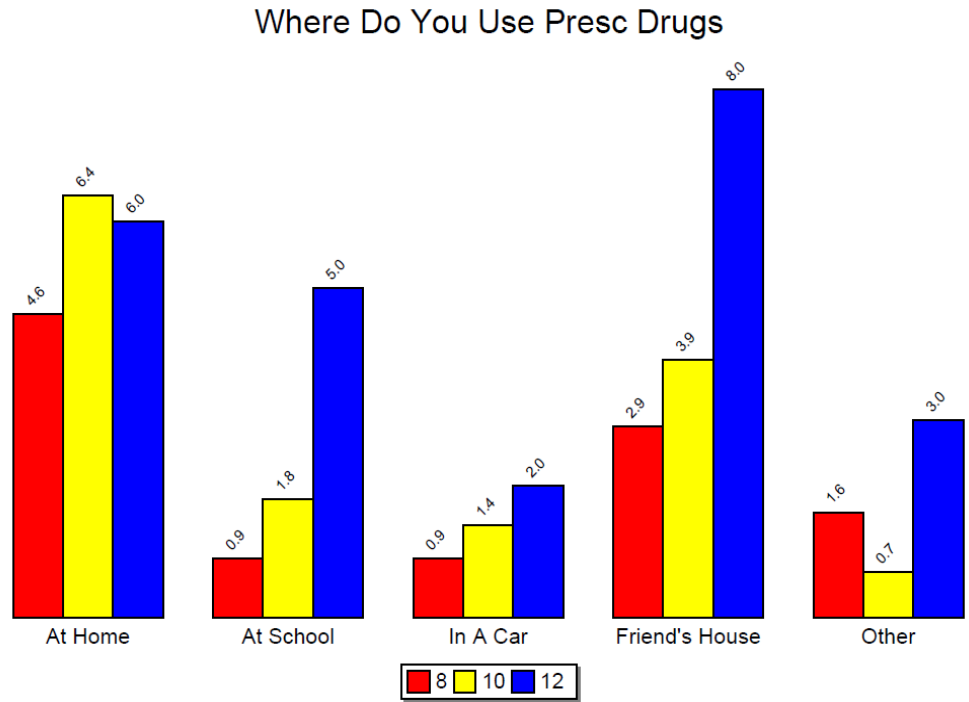


Source: Pride Surveys

Place of Use: Prescription Drugs

Approximately 7.7% of students stated past 30 day use of prescription drugs.

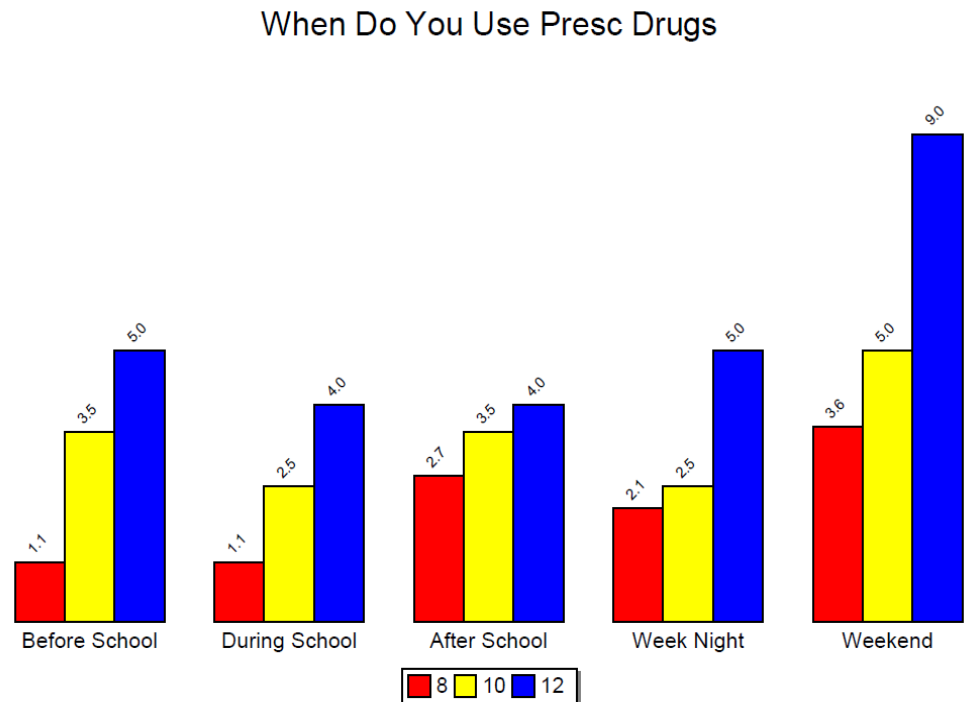
Most common place of prescription drug use for all grades was at a home. However, youth in 12th grade reported the highest percentage of use at a friend's house.



Time of Use: Prescription Drugs

Highest use of prescription drugs, for all grades, was on the weekends.

Students also report using prescription drugs before, during, and after school at a similar rate.



CHAPTER 5: ACCESS TO CARE

Number of Active Health Professionals: Carteret County

- Population to Physician ratio: 610:1
- Population to Dentist ratio: 1,651:1
- Population to Nurse Practitioner ratio: 1,934:1
- Population to Physician Assistant ratio: 2,418:1
- Population to Registered Nurse ratio: 124:1

Carteret

MSA county designation: Nonmetropolitan

AHEC Region: Eastern AHEC



■ 2011 ACTIVE HEALTH PROFESSIONALS*■

Physicians[§]

Non-Federal Physicians	111
Primary Care Physicians	38
<i>Family Practice</i>	15
<i>General Practice</i>	0
<i>Internal Medicine</i>	9
<i>Obstetrics/Gynecology</i>	7
<i>Pediatrics</i>	7
Other Specialties	73
Physicians per 10,000 Population**	16.4
Primary Care Physicians per 10,000 Population**	5.6
Federal Physicians***	3
<u>Dentists and Dental Hygienists</u>	
Dentists	41
Dental Hygienists	46

Nurses

Registered Nurses	546
<i>Nurse Practitioners</i>	35
<i>Certified Nurse Midwives</i>	0
Licensed Practical Nurses	134
<u>Other Health Professionals</u>	
Chiropractors	10
Occupational Therapists	11
Occupational Therapy Assistants	4
Optometrists	9
Pharmacists	75
Physical Therapists	37
Physical Therapist Assistants	11
Physician Assistants	28
Podiatrists	4
Practicing Psychologists	9
Psychological Associates	3
Respiratory Therapists	40

Source: http://www.shepscenter.unc.edu/hp/publications/2011_HPDS_Databook.pdf

In 2011, Carteret County ranked 8th in the state for the largest number of Dentists per 10,000 population, with 41 dentists, and ranked 9th in the state for the largest number of Pharmacists per 10,000 population, with 75 pharmacists. For a complete report and explanation of this data, click on the link above.

Self-Reported Access

Health Insurance

2012 BRFSS Survey Results

“Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare??” Approximately **78.2%** of the population in **Eastern North Carolina said they had some kind of health insurance coverage.

	Total Respond.^	Yes			No		
		N	%	C.I.(95%)	N	%	C.I.(95%)
North Carolina	11,860	9,933	79.0	78.0-80.0	1,927	21.0	20.0-22.0
-Eastern NC	3,912	3,244	78.2	76.4-80.0	668	21.8	20.0-23.6
GENDER							
Male	1,496	1,212	77.3	74.3-80.0	284	22.7	20.0-25.7
Female	2,416	2,032	79.1	76.8-81.3	384	20.9	18.7-23.2
RACE							
White	2,444	2,142	83.2	81.0-85.1	302	16.8	14.9-19.0
African American	872	687	74.8	70.6-78.6	185	25.2	21.4-29.4
Other minorities	562	389	57.0	50.4-63.4	173	43.0	36.6-49.6

****Eastern North Carolina:** Beaufort, Bertie, Bladen, Brunswick, Camden, Carteret, Chowan, Columbus, Craven, Cumberland, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Harnett, Hertford, Hoke, Hyde, Johnston, Jones, Lenoir, Martin, Nash, New Hanover, Northampton, Onslow, Pamlico, Pasquotank, Pender, Perquimans, Pitt, Robeson, Sampson, Scotland, Tyrrell, Washington, Wayne, and Wilson counties.

Community Opinion Survey Results

When asked, “Do you have health insurance? Of those who participated in the Community Opinion Survey, **82%** of the respondents stated, “YES”.

When asked, “In the past 12 months, have you, or anyone in your household had trouble getting needed medical care from any type of health care provider, dentist, pharmacy, or other facility?” **24.7%** of respondents stated, “Yes”.

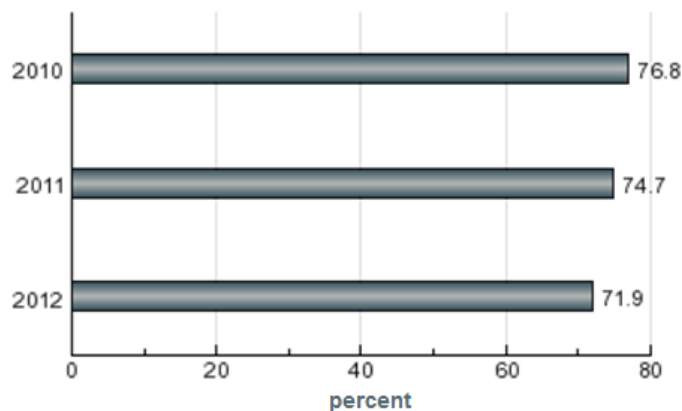
Some of the top reasons for not being able to access medical care included:

1. The cost was too high
2. No dental insurance
3. No health insurance
4. Health insurance didn't cover what I needed
5. The wait was too long/ Couldn't get an appointment

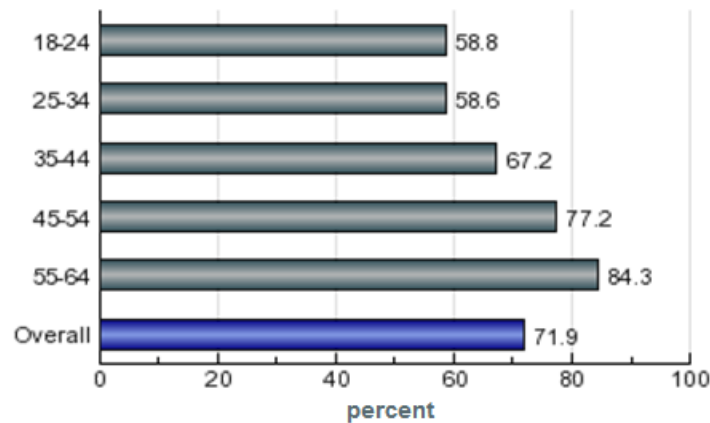
Insured Population

Medical costs in the United States are extremely high, so people without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they will not seek treatment until the condition is more advanced and therefore more difficult and costly to treat. This indicator below shows the percentage of adults aged 18-64 years that have any type of health insurance coverage in Carteret County. Data was taken from the American Community Survey, <http://factfinder2.census.gov/>

Time Series Data



Adults with Health Insurance by Age



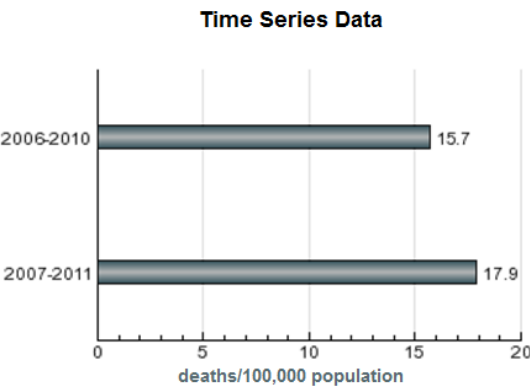
Mental Health

Mental Health continues to be identified in both the Key Informant Survey and the Community Opinion Survey as a priority health issue to address. Issues related to access to care including: limited knowledge on how to access services, limited transportation to mental health services outside the county, or fewer providers/limited services available in the county. In addition to access to care, suicide, substance abuse and unintentional and accidental overdoses remain top concerns in Carteret County related to mental health.

Suicide

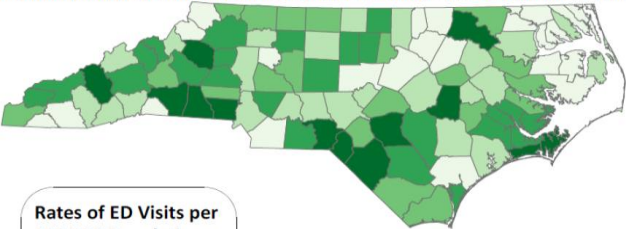
Suicide is a major, preventable public health problem. In 2007, suicide was the 11th leading cause of death in the United States. Based on 2007 age-adjusted death rates, men were nearly four times more likely to die of suicide than females, and white individuals were over two times more likely to die of suicide than black or Hispanic individuals. Older Americans are disproportionately likely to die by suicide. An estimated eight to 25 attempted suicides occur for every suicide death. Carteret County also has one of the highest rates of unintentional or undetermined intent poisonings in the state. The map below provides an overview of rates of Emergency Department usage.

The Healthy People 2020 national health target is to reduce the suicide rate to 10.2 deaths per 100,000 populations.



Unintentional Poisonings: Emergency Department Visits

Rates* of Emergency Department (ED) Visits for Substance Abuse**, Unintentional, or Undetermined Intent Poisonings by County: N.C., 2009***



Rates of ED Visits per 100,000 Population

- 116.7 - 481.1
- 481.2 - 689.6
- 689.7 - 793.5
- 793.6 - 1,001.6
- 1,001.7 - 2,084.0

*Note: Rates are per 100,000 N.C. population.

**Note: Drug poisonings exclude alcohol and tobacco-related ED visits.

***Source: NC DETECT, UNC Chapel Hill Department of Emergency Medicine

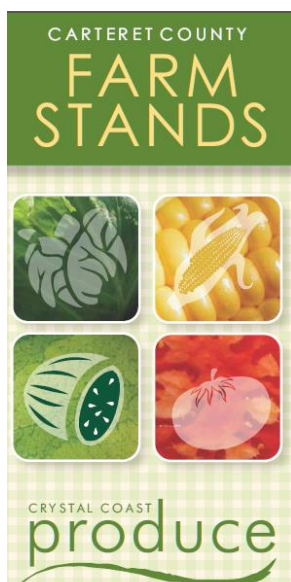
Analysis: K. Harmon, North Carolina Division of Public Health, Injury and Violence Prevention Branch

Carteret County remains one of the top counties in the state for the rate of ED visits related to Substance Abuse, Unintentional Poisonings, and Overdoses. Carteret County also has a higher number of prescribers per population.

CHAPTER 6: PHYSICAL ENVIRONMENT

Water quality, air quality, access to healthy foods, and the built environment all play a role in influencing the population's behavior. Safe neighborhoods with sidewalks, access to parks, clean drinking water, and access to grocery stores and farmers markets can have a positive impact on the community's health.

Built Environment



Access to Healthy Food:

The accessibility, availability and affordability of healthy and varied food options in the community increase the likelihood that residents will have a balanced and nutritious diet. Farm stands and farmers markets provide a way for community members to buy fresh and affordable agricultural products while supporting local farmers. Because of Carteret County's climate, farmers and gardeners are able to harvest fresh, healthy vegetables almost every month of the year. Many local farms operate roadside farm stands, and participate in farmers markets throughout the county, making fresh, local produce more accessible throughout the year.

Several farmers in the county are preparing to accept SNAP/EBT cards. This will enable individuals receiving federal assistance the opportunity to purchase fresh local produce.

Increasing access to fresh foods is one way to support low- income families to cook and eat healthier meals and to maintain good eating habits. For more information on local farmers markets or how to grow your own vegetable garden, contact the NC Cooperative Extension, Carteret County Center or visit <http://carteret.ces.ncsu.edu>.

Access to Places for Physical Activity:

Our natural environment lends itself nicely to outdoor recreation activities. The beaches, waterways, forests and other natural areas provide a variety of opportunities for outdoor recreation including: hiking, biking, jogging, swimming, kayaking, and more. Carteret County Parks and Recreation recently updated the walking trail guide map, and is currently working on a park guide. When finished, both guides will be available for download on the Carteret County Parks and Recreation website, www.ccparksrec.com in 2014.

Additional information on Healthy Eating, Active Living, and Tobacco-free environments can be found by going to www.localstrides.com, part of the Region 10, Community Transformation Grant Project.

Inventory of Active Living Environments:

- 14 county maintained Parks and Recreation areas including: district parks, athletic fields, picnic facilities, beach and water access points, and 2 recreation centers throughout the county.
- 18+ trails in the county for walking, hiking, jogging, viewing nature, biking, and more.
- Municipal parks, athletic fields and recreation areas are located throughout the county in the towns of Morehead City, Atlantic Beach, Emerald Isle, Beaufort, Newport and more. Several of the larger municipalities have a Recreation Committee which supports local recreation activities and adult and youth leagues. For a list of parks and recreation agencies, see [Appendix A](#), Community Resource Guide.
- 89 miles of beaches including Cape Lookout National Seashore as well as places such as the Rachel Carson Reserve, Fort Macon State Park, and the Croatan National Forest.

Community Opinion Survey

Bike, Pedestrian and Public Transportation Section:

“How do you rate the present bicycling and walking conditions in your community?”

- 55% rated the conditions fair or poor
- 34.1% rated the conditions good
- 10.9% rated the conditions excellent

“How often do you bike or walk?”

- 17% never
- 38% few times/ month
- 34% few times/week
- 11% 5+ times/ week

Of those who responded to the survey, 80 % stated, “Yes”, they would bike or walk more often if more bicycle lanes, trails, sidewalks and safe roadway crossings were provided for bicyclists and pedestrians.

Parks and Recreation Section:

Rank the TOP 3 types of RECREATIONAL FACILITIES you would like to see more of in Carteret County:

1. Aquatic facilities (Pools or splash parks)
 2. Parks
 3. Recreation Centers
-
4. Trails
 5. Dog Parks

Rank the TOP 3 types of RECREATIONAL PROGRAMS you would like to see more of in Carteret County:

1. Afterschool programs
 2. Adventure programs
 3. Fitness program
-
4. Nature programs
 5. Social activities/programs

Environmental Health

There are many agencies and local organizations that work to protect the natural resources (recreational waters, beaches, and marshes), as well as county and municipal government agencies which oversee planning, construction, development, and drinking water quality. Protection of the physical environment is essential to maintain a healthy community.

Based on Community Input, the following issues were the most important environmental issues for Carteret County to address.

- Mold
- Pest Control (Mosquitos, bed bugs)
- Littering
- Recycling opportunities
- Water Pollution
- Animal control/ Stray animals

Community Opinion Survey

Environmental Health Section:

Of the survey participants, when asked, "Do you have concerns about the water you and your family drink, wash with, or use in your home?" **29%** stated "Yes"

Is your water supply from a private drinking water well? **39.9%** stated "Yes",

60.1% stated "No", Municipal water supply

For more information on Environmental Health services, programs, and statistics, contact the Carteret County Health Department Environmental Health Division at (252) 728-8499.

CHAPTER 7: COMMUNITY INPUT

Survey Demographics Comparison

		Survey Respondents (Gender)	
Gender	Carteret County	Key Informant	Community Opinion
Male	49.3%	41.1%	26.9%
Female	50.7	58.9%	71.6%
			1.5% <i>Prefer not to answer</i>
		Survey Respondents (Race)	
Race	Carteret County	Key Informant	Community Opinion
White	89.9%	91%	92%
Black	6.3%	5.9%	7.6%
Hispanic <i>(Ethnicity)</i>	3.8%	5.2%	2.6%
		Survey Respondents (Age)	
Age	*Carteret County	Key Informant	Community Opinion
18-20	<i>No data available</i>	0	2.3%
21-29	10.6%	3.7%	9.7%
30-39	10.8%	13.4%	19.2%
40-49	14.1%	22.4%	19.6%
50-59	16.4%	39.6%	28.3%
60-69	14.5%	13.4%	15.1%
70-79	8.0%	7.5%	4.3%
80+	4.5%	0	.7%
<i>*Data based on 2010 Census for Carteret County</i>			
		Survey Respondents (Zip code)	
Zip code(s)	Carteret County	Key Informant	Community Opinion
Atlantic Beach, Pine Knoll Shores, Salter Path, Indian Beach	4.7%	5.2%	3.7%
Morehead City	21.7%	37.3%	26.6%
Newport	32.2%	21.6%	30.5%
Beaufort	17.2%	17.9%	23.6%
Down East	10.3%	9.7%	6.2%
Western Carteret	22.6%	8.2%	8.5%
<i>*Data based on 2010 Census for Carteret County ~66,469</i>			

Summary of Demographics Comparison

Key Informant Survey results were much more similar to the county demographics when looking at gender and race percentages. However, the majority of participants were middle age, which is typical of the population selected to participate in the Key Informant survey, i.e. individuals still in the workforce. Also, slightly more participated from the Morehead City Zip code as the majority of businesses, offices, and larger churches are located in Morehead.

The Community Opinion Survey results were similar to county demographics by race, as well as the percentage of response from the various Zip codes in the county. However the majority of the participants were female, approximately 70%. Furthermore, younger individuals (ages less than 40) were more likely to participate in the Community Opinion Survey than individuals over 40. The Community Opinion survey was also a convenience sample which means that the data cannot be generalized for the entire county. However, the results do provide an overview of the opinions on the current health status and community needs in the county. For results of both of the surveys, please see [Appendix B](#).

Perception of the County

Survey data indicated residents felt Carteret County is a relatively safe, low crime community, with adequate community and social support, and with good schools--great for raising a family. Based on responses from the Community Opinion Survey, of those surveyed, 87 % strongly agreed or agreed that, "Carteret County was a safe place to live." Of those surveyed, 82% strongly agreed or agreed that, "Carteret County was a good place to raise children," and 77% strongly agreed or agreed that, "Carteret County was a good place to grow old." Approximately 66% of those surveyed strongly agreed or agreed that "There was plenty of help for people during times of need in Carteret County," and 53% strongly agreed or agreed that, "There was a good health care system in Carteret County."

The only statement which scored higher on the negative side was, "There is plenty of economic opportunity in Carteret County." Approximately 53% of survey respondents disagreed or strongly disagreed with that statement. Unfortunately this is evident by our seasonal unemployment numbers, as the types of industry and jobs available in the community are traditionally centered on tourism. Seasonal jobs typically provide lower wages and limited benefits. Furthermore, the 20-29 year old demographic represent the smallest portion of the total population in Carteret County, this may be further evidence of the lack of economic opportunity with those entering the workforce.

Quality of Life Statements

How do you feel about these statements?	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	+ or -
"There is a good healthcare system in Carteret County." (Consider the cost and quality, number of options, and availability of healthcare providers in the county.)	10.7%	42.9%	28.5%	15.4%	2.7%	53% +
"Carteret County is a good place to raise children." (Consider the quality and safety of schools and child care programs, after school programs, and places to play in this county.)	30.3%	51.7%	11.7%	5.6%	.77%	82% +
"Carteret County is a good place to grow old." (Consider the county's elder-friendly housing, transportation to medical services, recreation, and services for the elderly.)	26.0%	51.6%	15.4%	6.9%	.39%	77% +
"There is plenty of economic opportunity in Carteret County." (Consider the number and quality of jobs, job training/higher education opportunities, and availability of affordable housing in the county.)	2.5%	18.2%	27.1%	37.5%	15.0%	53% -
"Carteret County is a safe place to live." (Consider how safe you feel at home, in the workplace, in schools, at playgrounds, parks, and shopping centers in the county.)	29.8%	57.4%	10.7%	1.5%	.39%	87% +
"There is plenty of help for people during times of need in Carteret County." (Consider social support in this county: neighbors, social groups, faith community outreach, community organizations, and emergency monetary assistance.)	16.5%	49.5%	21.7%	10.4%	1.9%	66% +

Priority Issues Identified by Community Input

Key Informant Survey

"Health issues which are a major problem..."

1. Overweight and Obesity
2. High Blood Pressure
3. Diabetes
4. Heart Disease
5. Cancer

Key Informant Survey

"Mental Health/Substance Abuse issues which are a major problem..."

1. Adult Prescription Drug Abuse
2. Illegal Drug Use
3. Alcohol Abuse
4. Youth Prescription Drug Abuse
5. Youth Illegal Drug Use

Community Opinion Survey

"Health issues which are a major problem..."

1. Overweight and Obesity
2. Diabetes
3. Cancer
4. High Blood Pressure
5. Heart Disease

Community Opinion Survey

"Mental Health/Substance Abuse issues which are a major problem..."

1. Illegal Drug Use
2. Adult Prescription Drug Abuse
3. Alcohol Abuse
4. Tobacco Use
5. Youth Illegal Drug use

Priority Issues Identified by Community Input Continued

Key Informant Survey

"Environmental issues which are a major problem..."

1. Mold
2. Pest Control (Mosquitos, bed bugs)
3. Littering
4. Recycling opportunities
5. Water Pollution

Key Informant Survey

"Services or programs which you feel are-Extremely Difficult to Find or Use-, or are Non Existent in Carteret County..."

1. Access to Mental Health Care
2. Access to Drug/Alcohol Treatment
3. Public Transportation
4. Recreation Activities for Youth/Teens/Families
5. Affordable Housing

Key Informant Survey

"Our community needs to do more to address..."

1. Substance Abuse (Prescription Drugs, Alcohol, and Illegal Drugs)
2. Access to Mental Health Services
3. Obesity/ Overweight
4. Increase Job Opportunities
5. Increase Economic Development/ Smart Growth

Community Opinion Survey

"Environmental issues which are a major problem..."

1. Pest Control (Mosquitoes, bed bugs)
2. Mold
3. Animal control/ stray animals
4. Littering
5. Recycling Opportunities

Community Opinion Survey

"Services or programs which you feel are -Extremely Difficult to Find or Use-, or are Non-Existent in Carteret County..."

1. Access to Mental Health Care
2. Recreation Activities for Youth/Teens/Families
3. Public Transportation
4. Affordable Housing
5. Access to Drug/Alcohol Treatment

Community Opinion Survey

"Our community needs to do more to address..."

1. Obesity/ Overweight
2. Substance Abuse (Prescription Drugs, Alcohol, and Illegal Drugs)
3. Access to Mental Health Services
4. Increase Job Opportunities
5. Tobacco Use/ Reduce Exposure to Secondhand-smoke

Inventory of Existing Services- Needs and Missing Services

[Appendix A](#) provides a list of community organizations and agencies as well as medical and health resources in the community. As the community changes this list will be edited and updated as needed.

Needs, gaps, or missing services:

- Adult dental care for uninsured, low-income
- Public Transportation-fixed route service
- Mental Health Providers/Substance Abuse services (24 hr. Mobile Crisis)
- Beds for Mental Health/SA patients at Hospital

CHAPTER 8: NEXT STEPS

Priority Selection

Members of the Community Health Assessment Planning Team met to identify and discuss current and emerging issues in the county. Using the data provided in this report, a presentation of the primary and secondary data was given. Each member of the committee was then asked to write their top five issues for the community address. Each of these “votes” was then grouped into three common ideas and themes. The following is a list of three priority areas:

- Chronic Disease
- Substance Abuse/Mental Health
- Economic Development

The group discussed these in terms of the available resources in the community to address the issues, gaps and missing services, as well as underlying causes of the issues. This input will be used in the next planning stages.

Next Steps

Using this report as the foundation, additional community meetings will be held in 2014 to develop and implement a Community Action Plan to address each of the priority areas. The Community Action Plan is due June 2014 and will serve as a guide for groups working to address priority issues identified by this report. If needed, new coalitions will be formed to address issues through specific interventions, projects, programming, and policy changes.

Contact the Carteret County Health Department, (252) 728-8550, if you have questions or concerns about topics represented in this report, would like to become involved with new projects or initiatives, or would like more information.

CHILDREN'S ARTWORK: What Do I like Best About Carteret County?

Cameron, Age 9
"Surfing and fishing"



Ella, Age 8
"Gymnastics with my friends"



Daniel, Age 6
"Fishing for all kinds of fish"



Lennox, Age 5
"Mommy and me at the park"



Adrianna, Age 6
"Fishing"



Orin, Age 9
"A day at the beach, picking up seashells"



Peyton, Age 8
"Soccer with my friends"



Anna, Age 8
"Sunset at the Beach"



Martin, Age 5
"The Aquarium"





2013 Carteret County Community Resource Guide

This guide serves as a directory for information on community health resources in Carteret County. As the county continues to grow and change so will this guide. Help us keep this information up to date, send information about community resources to the Carteret County Health Department: 3820 A Bridges Street, Morehead City, NC 28557 or call (252) 728-8550. This guide will be reviewed and updated annually.

TRUST A 1-800-DOCTORS CALL ADVISOR TO
**HELP YOU FIND
THE RIGHT DOCTOR**



1-800-DOCTORS

1-800-362-8677

Do you need to see a doctor right away?

Do you know which doctor to see?

Do you know if the doctor takes your insurance?

Find someone who makes you feel comfortable having an honest conversation. There's no need to compromise on a lasting relationship this important, especially since 1-800-DOCTORS can connect you with several qualified doctors.

Get the one-on-one guidance you deserve. **1-800-DOCTORS** local Call Advisors make sure your insurance will be accepted and that a doctor is board-certified and verified by your preferred hospital *before* we help you make your first appointment.

Our free service connects you with doctors whose backgrounds, credentials and training are verified by the nation's largest hospital networks and health systems.

Our partnering hospitals and healthcare systems are ranked among the highest in the nation for providing consistent, top quality care.

We connect you with a list of doctors based on our experience and the factors you consider the most important for your unique situation.

**1-800-DOCTORS ARE A SIMPLE, FREE, & PERSONAL
WAY TO FIND THE RIGHT DOCTOR!**

ASSISTED LIVING / FAMILY CARE HOMES / REST HOMES

Brookdale- Carolina House	Morehead City	Office: (252) 726-4454 Fax: (252) 726-9709
Snug Harbor on Nelson Bay	Sea Level	Office: (252) 225-4411 Ext 241 Fax: (252) 225-3931
Carteret House Assisted Living	Newport	Office: (252) 223-2600 Fax: (252) 223-4754
Croatan Village	New Bern	Office: (252) 634-9066 Fax: (252) 634-1862
Harris Family Care Home	Beaufort	Office: (252) 728-6525 Fax: (252) 728-2801
Rimmer Family Care Home	Beaufort	Office: (252) 247-7830 Fax: (252) 728-2801
Carebridge Assisted Living	Jacksonville	Office: (910) 347-1300

NURSING CENTERS / INTERMEDIATE CARE & SKILLED NURSING FACILITIES

Croatan Ridge <i>(Formerly Britthaven of Newport)</i>	Newport	Office: (252) 223-2560 Fax: (252) 223-3370
Crystal Bluffs	Morehead City	Office: (252) 726-0031 Fax: (252) 726-5831
Harborview Healthcare Center	Morehead City	Office: (252) 726-6855 Fax: (252) 808-2074
Snug Harbor on Nelson Bay	Sea Level	Office: (252) 225-4411 Ext 241 Fax: (252) 225-3931
Heritage Healthcare <i>(Formerly Taylor's Extended Care)</i>	Sea Level	Office: (252) 225-2408, 225-4611 Fax: (252) 225-1228
Cherry Point Bay <i>(Formerly Britthaven of Havelock)</i>	Havelock	Office: (252) 444-4631 Fax: (252) 444-5799
River Point Crest <i>(Formerly Britthaven of New Bern)</i>	New Bern	Office: (252) 637-4730 Fax: (252) 638-3552
Primer Nursing & Rehab <i>(Formerly Britthaven of Jacksonville)</i>	Jacksonville	Office: (910) 353-7222 Fax: (910) 355-2659
Carolina River <i>(Formerly Britthaven of Onslow)</i>	Jacksonville	Office: (910) 455-3610 Fax: (910) 938-2659
Ombudsman	New Bern	1-800-824-4648 (252) 638-3185 ext 3007

HOME HEALTH & HOSPICE PROVIDERS

Carteret Home Health Service	Morehead City	Office: (252) 808-6081 Fax: (252) 808-6573 Hospice: (252) 808-6085
Liberty Home Care & Hospice	Morehead City	Office: (252) 247-4748 Fax: (252) 247-2445 Central Intake: 1-800-999-9883
Gentiva Home Health (formerly Tarheel)	Morehead City	Office: (252) 726-9300 Fax: (252) 726-9832
Community Home Care & Hospice	Morehead City	Office: (252) 672-8301 Fax: (252) 672-8306
Hospice of Carteret County	Morehead City	Office: (252) 808-6085 Fax: (252) 808-6573
Crystal Coast Hospice House <i>Serving Eastern NC</i>	Newport	Office: (252) 808-2244
Carolina East Home Care	New Bern	Office: (252) 633-8182 Fax: (252) 636-0038
Craven Co. Health Dept. Home-Health Hospice	New Bern	Office: (252) 636-4930 Fax: (252) 636-5301
Continuum Home Care & Hospice	Jacksonville	Office: (910) 989-2682 Fax: (910) 989-2691
Onslow Home Health & Hospice	Jacksonville	Office: (910) 577-6660 Fax: (910) 577-6636

PRIVATE DUTY & PERSONAL CARE AGENCIES

Friendly Caregivers	Morehead City	Office: (252) 240-1234
Arcadia Healthcare (Personal Care, Private Pay Only)		Office: (252) 727-0127
Help-at-Home		1-866-672-3100
Extensions of Life	Morehead City	Office: (252) 726-2338
Home Companion Service	Morehead City	Office: (252) 726-6575
Home Helpers	Morehead City	1-888-727-0330 (252) 727-0330
Interim Health Care		1-800-849-6144 Fax: (910) 483-6049
Professional Nursing Service	Morehead City	Office: (252) 247-6911 Fax: (252) 247-0134
Pediatric Services of America, Inc.,	Greenville	1-800-227-3894
Maxim Health Care (Personal Care)		Office: (252) 726-8746 Fax: (252) 726-6673
Accommodating Home Care Service	New Bern	Office: (252) 635-9005 Fax: (252) 635-9006

LOW INCOME HOUSING

Crystal Coast Housing (M-TH 8-3:15)	Morehead City	Office: (252) 726-8042
Eastern Carolina Regional Housing Authority (Macon Court, Kings Terrace)	Morehead City	Office: (252) 726-4401
Westwood Square Apartments (M-TH 9-3)	Morehead City	Office: (252) 247-4666
Beaufort Housing Authority	Beaufort	Office: (252) 728-3226
Carteret Court Apartments	Beaufort	Office: (252) 728-2679
Brentwood Village Apartments (M-TH 10-3)	Beaufort	Office: (252) 728-4557
Elm Green	Newport	Office: (252) 223-1266
Blue Point Bay	Newport	Office: (252) 222-0015

HOUSING ASSISTANCE/ SHELTERS

Coastal Community Action	Newport	Office: (252) 223-1630
Carteret County Domestic Violence Program	Beaufort	Office: (252) 728-3788
Habitat for Humanity	Newport	Office: (252) 223-2111
Family Promise of Carteret County	Morehead City	Office: (252) 222-0019
Hope Mission Men's Shelter <i>*Emergency Overnight Housing*</i> <i>*Emergency Financial Assistance*</i>	Morehead City	Office: (252) 240-2359
Coastal Women's Shelter	New Bern	Office: (252) 638-4509, (252) 638-5995
New Bern Shelter	New Bern	Office: (252) 637-4185, (252) 633-2021
Onslow Community Outreach	Jacksonville	Office: (910) 347-3227, (910) 455-6264

IN-PATIENT REHABILITATION CENTERS

Carolina East Rehab	New Bern	Admissions: (252) 633-8020 Fax Referral: (252) 633-8294 Reports: (252) 633-8022 Direct Fax: (252) 633-8294
Coastal Rehab Hospital	Wilmington	Office: (910) 343-7845 Fax: (910) 815-5623
Duke Rehab	Durham	Office: (919) 684-4551 Fax: (919) 681-8642
Heritage Hospital Rehab	Tarboro	Office: (252) 641-7460 Fax: (252) 641-7465
Lenoir Memorial Rehab Center	Kinston	Office: (252) 522-7776 Fax: (252) 522-7867
Regional Rehab Center	Greenville	Office: (252) 847-4345 Fax: (252) 847-8222 Reports: (252) 847-4441/ 847-5143
UNC Hospitals Rehab	Chapel Hill	Office: (919) 966-5929 Fax: (919) 966-2595
WakeMed Rehab	Raleigh	Office: (919) 350-7876 Fax: (919) 350-8791

OUT-PATIENT REHABILITATION CENTERS

Beaufort Physical Therapy	Beaufort	Office: (252) 838-0222 Fax: (252) 838-0224
Carolina Physical Therapy Associates, Inc.	Morehead City	Office: (252) 726-9777 Fax: (252) 726-8767
Carteret General Hospital Therapy	Morehead City	Office: (252) 808-6461 Fax: (252) 808-6990
Carteret Physical Therapy & Sports Med Center	Morehead City	Office: (252) 247-2738 Fax: (252) 240-3882
Moore Sports Therapy and Rehab	Morehead City	Office: (252) 808-3151 Fax: (252) 808-3120
Specialty Center for Physical Therapy	Morehead City	Office: (252) 726-1802 Fax: (252) 726-1805
Snug Harbor <i>Physical and Occupational Therapy</i>	Sea Level	Office: (252) 225-3131 Fax: (252) 225-6221
Therapy Center of Cedar Point	Cedar Point	Office: (252) 393-8828 Fax: (252) 393-7928

GENERAL MEDICAL HOSPITALS

Carteret General Hospital	Morehead City	Office: (252) 808-6000
Carolina East Medical Center	New Bern	Office: (252) 633-8111
Onslow Memorial	Jacksonville	Office: (910) 343-7000
Camp Lejeune Naval Hospital	Jacksonville	Office: (910) 450-4300
Lenoir Memorial Hospital	Kinston	Office: (252) 522-7000
New Hanover Regional Medical Center	Wilmington	Office: (910) 343-7040
Duplin General Hospital	Kenansville	Office: (910) 296-0941
Vidant Medical Center	Greenville	Office: (252) 847-4100
Wayne Memorial Hospital	Goldsboro	Office: (910) 736-1110
Duke University Hospital	Durham	Office: (919) 684-8111
University of North Carolina Hospitals	Chapel Hill	Office: (910) 96694131
Wake Medical Center	Raleigh	Office: (919) 736-1110
Veteran Affairs Hospital	Durham	Office: (919) 286-1441 ext 6250
Baptist Medical Center	Winston-Salem	Office: (336) 716-2011

VETERAN AFFAIRS HOSPITAL/ TRANSFER COORDINATORS

Asheville, NC	Ext 15219	Office: (800) 932-6408
Fayetteville, NC		Office: (910) 822-7002
Durham, NC	Ext 6250	Office: (919) 286-0411
Salisbury, NC		Office: (704) 638-9000
Hampton, VA	Ext 2122	Office: (757) 722-9961
Richmond, VA		Office: (804) 675 5824
Salem, VA	Ext 1769	Office: (540) 982-2463
Beckley, WV	Ext 4778	Office: (304) 255-2121

VETERAN'S SERVICES

Veteran's Service Office	Morehead City	(252) 728-8440
Veteran's Affairs Clinic	Morehead City	(252) 240-2349

MEDICAL TRANSPORT SERVICES

Carteret General Hospital (Paramedic)		Office: (252) 808-6133
Crystal Coast Medical Transport CCMT (Basic Life Support Only)		Office: (252) 808-5555
Friendly Transport		Office: (252) 808-3400

TRANSPORTATION

Carteret County Area Transportation System (CCATS)	Morehead City	Ride Reservation Line (252) 240-1043
Coastal Community Action <i>*Assistance with transportation for Seniors to appointments*</i>	Newport	Office: (252) 223-1630
R.S.V.P Retired Senior Volunteer Program (Senior Center)	Morehead City	Office: 728-3181 Ext 6105

HEALTH AND HUMAN SERVICES/ MENTAL HEALTH

Carteret County Health Department <ul style="list-style-type: none"> <i>Clinical Services</i> <i>WIC-Nutrition Assistance & Breastfeeding Support</i> <i>Environmental Health</i> <i>Animal Control</i> <i>Mobile Dental Unit- Miles of Smiles</i> 	Morehead City	Office: (252) 728-8550 Fax: (252) 222-7739
Carteret County Dept. of Social Services	Beaufort	Office: (252) 728-3181 Fax: (252) 728-3631
CoastalCare (Mental Health) <i>L.M.E. Local Management Entity</i>	Morehead City	Triage and Referral Line: 1-888-737-0327

PSYCHIATRIC & SUBSTANCE ABUSE HOSPITALS

Alamance Regional		1-336-538-7888
Behavioral Health Services Beaufort Co. Medical Center		(252) 975-4416
Broughton Hospital	Morganton	(828) 433-2111
Brynn Marr	Jacksonville	1-800-822-9507 (910) 577-1400
Cherry Hospital	Goldsboro	(919) 731-3326
Coastal Plain Hospital	Rocky Mount	1-800-234-0234
Crossroads Carolina East Medical Center	New Bern	Office: (252) 633-8204 Fax: (252) 633-8198
Day by Day	Smithfield	
Duke General		(919) 684-0100
Durham Regional		(919) 470-6137
Duplin General Psych Unit		(910) 296-0401
The Oaks (New Hanover Regional)	Wilmington	(910) 815-5625
Recovery Innovations Crisis Ctr	Jacksonville	Office: (910) 353-5118 Fax: (910) 577-1338
OPIOID Treatment Center	New Bern	Office: (252) 353-5346
Vidant Medical Center, Psych Unit	Greenville	Office: (252) 847-7264 Beeper: (252) 413-4117
Port Human Services Port Detox Center	New Bern Greenville	Office: (252) 672-8742 Ext 201/202 Office: (252) 413-1637 Fax: (252) 413-1818
Walter B Jones Alcohol & Drug Treatment	Greenville	Office: (252) 830-3426

PRESCRIPTION DRUG DISPOSAL

Carteret County Sheriff's Dept. <i>*Drop Box*</i>	Beaufort	(252) 504-4800
Morehead City Police Department <i>*Drop Box*</i>	Morehead City	(252) 726-5361
Emerald Isle Police Department <i>*Drop Box*</i>	Emerald Isle	(252) 354-2021
Conveniently dispose of unused, unwanted, or expired medications at the locations listed above. Proper storage and disposal of prescription medication can help keep you, your family, and the environment safe. Remember, never flush medication!		

CAROLINAS POISON CONTROL CENTER

24 hr. Poison Help Line: 1-800-222-1222**www.ncpoisoncenter.org****COUNSELING / EMOTIONAL SUPPORT**

Coastal Pregnancy Care Center	Morehead City	(252) 247-2273
Carteret County Domestic Violence Program	Morehead City	24 hr. (252) 728-3788 (252) 726-2336
Carteret County Rape Crisis Program	Morehead City	24 hr. (252) 725-4040 (252) 504-3668
Carteret County Women's Resource Center	Morehead City	(252) 247-6585
Disaster/Emergency Emotional Support American Red Cross	New Bern	(252) 637-3405
HIV Counseling & Referral <i>Carteret County Health Department</i>	Morehead City	(252) 728-8550 24 hr. Hotline: 1-800-232-4636
RHA Crisis Counseling	Morehead City	(252) 808-0052
NAMI-National Alliance on Mental Illness	Coastal Division	http://naminc.org/
Atlantic House (Mental Health)	Morehead City	(252) 648-8505
Le'Chris Counseling Services, Inc.	Morehead City	(252) 726-9006
Carteret Counseling Services, Inc.	Morehead City	(252) 247-1109
Alcoholics Anonymous/AI-Anon Alateen	Morehead City	(252) 726-8540
American Cancer Society		1-800-227-2345
Alzheimer Support		1-800-228-8738
NC Quitline Smoking Cessation <i>24 hr/ 7 days a week</i>		1-800-QUIT-NOW 1-800-784-8669
American Lung Association		1-800-586-4872
National Suicide Prevention Hotline		1-800-273-8255

FREE CLINIC / MEDICAL CARE / SCREENINGS

Broad Street Clinic	Morehead City	(252) 726-4562 Fax: (252) 726-4459
MERCI Clinic	New Bern	(252) 633-1599
Prostate, Breast and Skin Cancer Screenings <i>Sponsored by Carteret General Hospital- Raab Clinic</i>	Morehead City	(252) 808-6000 <i>*Various times throughout the year*</i>
REACH Dental Low-Cost Dental Day <i>Sponsored by One Harbor Church</i>	Morehead City	(252) 422-2899 www.oneharborchurch.com

FOOD ASSISTANCE

WIC Program Carteret County Health Dept.	Morehead City	Office: (252) 728-8550
Carteret County Dept. Social Services SNAP (Food Stamps) Assistance with vouchers for Martha's Mission	Beaufort	Office: (252) 728-3181
Hope Mission Free Meal Soup Kitchen Open Every Day 11 am – 12:30 pm	Morehead City	Office: (252) 240-2359
Martha's Mission Cupboard Food Pantry *Need voucher from DSS or CCHD (M, W, F)	Morehead City	Office: (252) 726-1717
Salvation Army *Need proof of income	Morehead City	Office: (252) 726-7147
The Storehouse Food Pantry Sponsored by East Coast Church (T & TH)	Morehead City	Office : (252) 725-5539
Glad Tidings Church Food Pantry Open every day	Morehead City	Office: (252) 726-0160
Woodville Baptist Church Food Pantry (TH) *Need voucher from DSS or CCHD *Every 3 rd Friday Participates with NC FOOD BANK	Beaufort	Office: (252) 728-1414
Loaves and Fishes Food Pantry 1 st , 2 nd , and 3 rd Mondays	Beaufort	Office: (252) 504-0123
Calvary Baptist Church 4 th Monday of each month	Beaufort	119 Bunch Rd, Beaufort NC 28516
St. James Methodist Church Matthew: 25 Food Pantry (M & TH)	Newport	Office: (252) 223-4727

MEALS ON WHEELS

Home Delivered Meals	Morehead City	(252) 726-4654
	Beaufort	(252) 342-7983
	Cape Carteret	(252) 393-7725
	Emerald Isle	(252) 354-2762
	Newport	(252) 223-5706

DISABILITY PROGRAMS / SERVICES

Services for the Blind <i>Carteret County Department of Social Services</i>	Beaufort	(252) 728-3181
Epilepsy Association		1-800-451-0694
American Red Cross	New Bern	(252) 637-3405
Division of Motor Vehicles Handicap Parking Permits	Morehead City	(252) 726-7695
Social Security Administration	New Bern	(252) 637-1703 1-800-772-1213
Vocational Rehabilitation	Morehead City	(252) 247-2037
Independent Living	New Bern	(252) 514-4806
Station Club	Morehead City	(252) 240-1025
NC Division of Services for Deaf and Hard of Hearing	Wilmington	1-800-205-9915 -Voice 1-800-205-9916 -TTY
Special Olympics of Carteret County <i>Carteret County Parks and Recreation</i>	Beaufort	252-504-4263

FAMILY / CHILDREN'S SERVICES

Carteret Partnership for Children	Morehead City	(252) 727-0440
Boys and Girls Club of Coastal Carolina	Morehead City Beaufort	(252) 726-6584 (252) 504-2465
Carteret County Health Department <ul style="list-style-type: none"> Care Coordination for Children WIC-Women Infants & Children Breastfeeding Peer Counselor Immunizations 	Morehead City	(252) 728-8550
Children's Developmental Services Agency (CDSA)	New Bern	(252) 514-4770 Fax: (252) 514-4773
Pediatricians <ul style="list-style-type: none"> Carteret Clinic for Adolescents & Children Ocean Side Pediatrics Dr Stanley Rule Pediatrics 	Morehead City	(252) 726-9511 (252) 622-4448 (252) 240-5437
Coastal Community Action <ul style="list-style-type: none"> Head Start Early Head Start 	Newport	(252) 223-1670
Parenting Programs <ul style="list-style-type: none"> Love and Logic Parenting Carteret Community College Carteret County Partnership for Children Coastal Pregnancy Care Center 	Morehead City	(252) 222-6000 *Life Enrichment Program* (252) 727-0440 (252) 247-2273
Cooperative Extension Carteret Center	Morehead City	(252) 222-6352
Family Support Network of NC		1-800-622-7119
Make-a-Wish Foundation		1-800-852-0042

HISPANIC/LATINO RESOURCES

DECHLA <i>Down East Council for Hispanic and Latino Affairs</i>	Newport	(252) 646-0303 dechlaacc@gmail.com
Migrant Farm Worker Health Program <i>Serves Carteret, Onslow Jones, and Craven</i>	Trenton	Office: (252) 448-9111 Fax: (252) 448-1443
ESL Programs Ingles Como Segunda Lengua <i>Carteret Community College</i>	Morehead City	(252) 222-6212
Legal Aid of North Carolina	New Bern	(252) 637-9502 1-866-219-5262

FITNESS CENTERS & GYMS

Cape Carteret Aquatics & Wellness Center	Cape Carteret	Office: (252) 393-1000
Snap Fitness (24 hr)	Morehead City Newport Beaufort Otway	Office: (252) 622-4222 Office: (252) 728-3357 Office: (252) 777-4349 Office: (252) 838-1196
Anytime Fitness (24 hr)	Morehead City	Office: (252) 648-8808
Sportscenter	Morehead City	Office: (252) 726-7070
Golds Gym	Morehead City	Office: (252) 247-4653
CrossFit Morehead City	Morehead City	Office: (252) 515-2851
Crystal Coast Strength & Conditioning	Bogue	Office: (252) 764-2398
Crossfit Carteret	Beaufort	Office: (252) 269-2722
Eastern Athletic Club	Beaufort	Office: (252) 728-1700
Leon Mann Senior Center	Morehead City	Office: (252) 247-2626

PARKS & REC DEPARTMENTS

Emerald Isle Parks and Rec <i>(Rec Center Memberships Available)</i>	Emerald Isle	Office: (252) 354-6350
Morehead City Parks and Rec <i>(Rec Center Memberships Available)</i>	Morehead City	Office: (252) 726-5083
Carteret County Parks and Rec <i>*Visit www.ccparksrec.com for a list of Park Facilities and Walking Trails in the county*</i>	Beaufort	Office: (252) 808-3301
<ul style="list-style-type: none"> • Fort Benjamin Park Recreation Center <i>Open to the Public</i> • Western Park Community Center <i>Open to the Public</i> 	Newport	Office: (252) 222-5858
	Cedar Point	Office: (252) 393-1481

FARM STANDS & LOCAL PRODUCE

Cooperative Extension Crystal Coast Produce	www.ces.ncsu.edu	
Carteret Local Food Network	www.carteretlocalfood.org	
Olde Beaufort Farmers Market Saturdays (8:30 – 12:30)	Beaufort	www.beaufortfarmersmarket.com
Saturday Morning Curb Market	Morehead City	(252) 222-6352



CHECK OUT www.localstrides.com for information on Active Living, Healthy Eating, and Tobacco Free Living initiatives in Carteret County and throughout Eastern North Carolina.

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APPENDIX B

2013 Key Informant Survey Results

The 2013 Key Informant Survey was developed by a multi-agency planning team led by the Carteret County Health Department and Carteret General Hospital. The purpose of the Key Informant Survey was to assess the opinion of community leaders, professionals, and other key individuals within the county regarding the community's most important issues. A total of 500 individuals were nominated by the CHA Planning Team, and were selected because of their position within the county and their knowledge about the unique needs of the county.

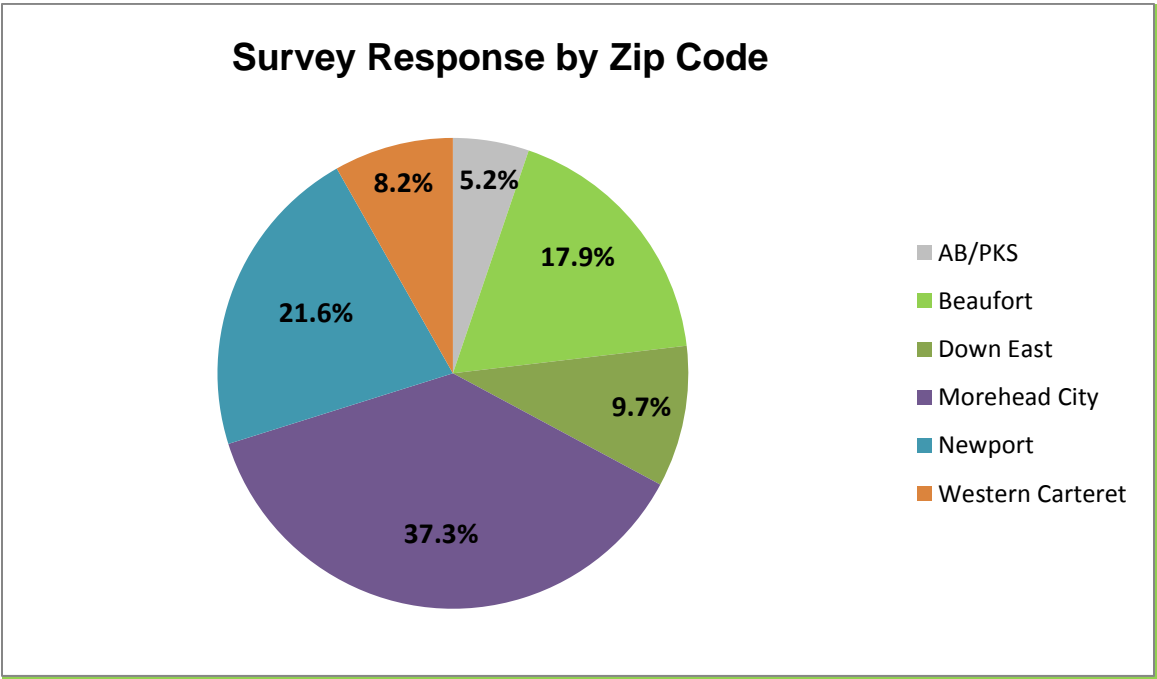
The survey was 10 questions long and took approximately 10 minutes to complete. Of the 500 surveys that were sent out, 134 were completed with a return rate of 26.8 per 100 surveys sent out.

This survey tool will be used in conjunction with the more comprehensive Community Opinion Survey data in addition to secondary data from state and local resources. Responses from this survey will help to identify and validate issues within the community, shedding light on strengths, as well as opportunities for improvement.

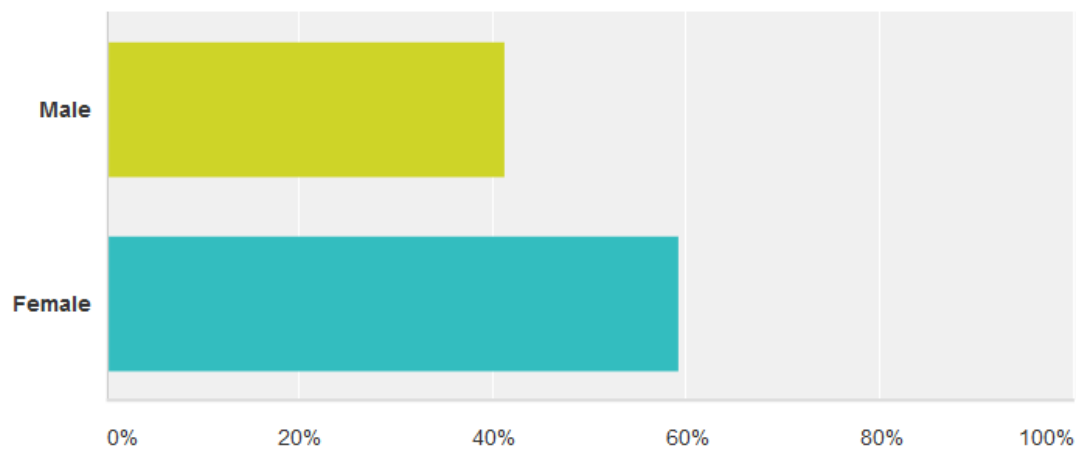
Survey responses were fairly similar to the demographics of the county. Slightly more females completed the survey than males, and the almost half of the responses were from individuals in the medical profession. Racially, the responses were similar to the county demographics for percentages of White, Black, and Hispanic respondents.

If you have additional questions or would like more information on the assessment process or results, please contact the Carteret County Health Department at (252)728-8550.

1. Please indicate the city and zip code in which you live or is closest to your home. If you do not live in Carteret County but work in county, please indicate the city and zip code closest to your work.

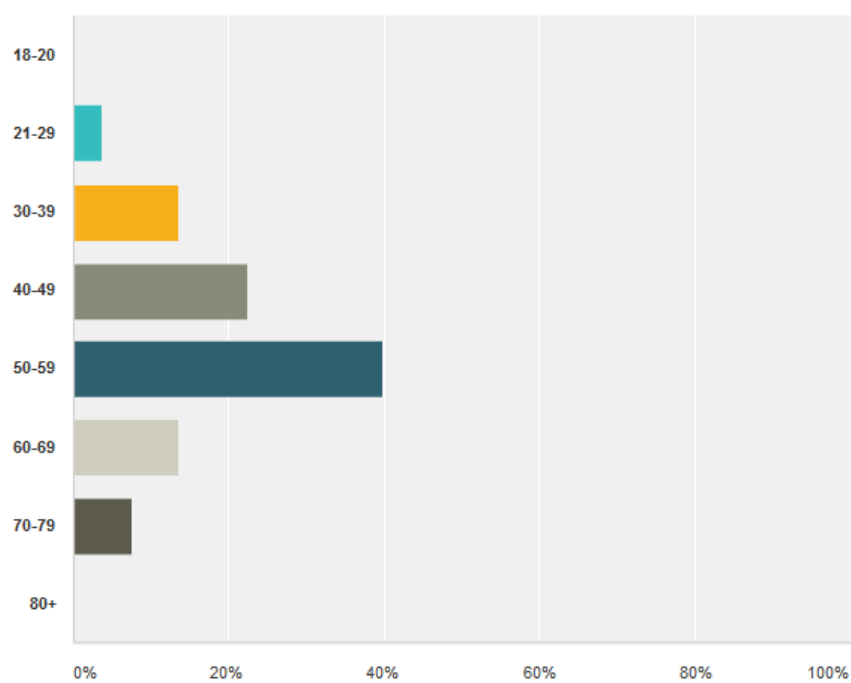


2. What is your gender?



Answer Choices	Responses	
Male	41.04%	55
Female	58.96%	79
Total		134

3. Check the range in which your age falls.



4. Which best represents your race? (Please check all that apply.)

Answer Choices	Responses
White	91.04%
Black or African American	5.97%
Hispanic/Latino	5.22%
American Indian or Alaskan Native	0.75%
Asian	0%
Pacific Islander or Native Hawaiian	0%
Do not know, unsure, no answer	0%
Other (please specify)	0%

5. Please select the category which best describes your professional affiliation.

Answer Choices	Responses
Business	4.48%
Community Agency / Non-profit Organization	10.45%
County / Municipal Government	17.91%
Education / School System Administrator / Teacher	11.94%
Elected Official	4.48%
Faith Community / Church / Spiritual Leader	2.99%
Healthcare / Medical Professional	43.28%
Military	0%
Other	4.48%

6. Survey respondents were asked to rank the following HEALTH ISSUES in Carteret County as a Major Problem, Somewhat of a Problem, Not a Problem, or I don't know.

Below is the ranking of the "Average Rating" score from greatest to least for "Major Problem".

1. Overweight and Obesity
2. High Blood Pressure
3. Diabetes
4. Heart Disease
5. Cancer
6. Stroke
7. Dental/Oral Health Problems
8. Lung Disease
9. Asthma
10. Motor Vehicle Crashes
11. Alzheimer's Disease
12. Pneumonia and Influenza
13. STDS
14. Kidney Disease
15. Unintentional poisonings and injuries
16. Infant death

Comments Question 6:

- "Mental health!!!! "
- "substance abuse- prescription and street drugs"
- "MENTAL HEALTH TREATMENT AND STABILIZATION."
- "Over use of prescription drugs of all ages!"
- "Mental health issues in children and adolescents, parents with sub-optimal skills or support to raise their children, parents whose lifestyle decisions negatively affect the health and life potential of their children, single parents struggling to provide for their children, weak job prospects with upward mobility that hampers parents, smoking is still an issue, very limited access to primary care--treating illness after already severe and often irreversible and having missed the opportunity to impact lifestyle to prevent or lessen disease."
- "Elder, child and domestic abuse. "
- "If "not a problem" means being handled adequately comparable to most other areas in the state, Childhood obesity= major problem."
- "Adolescent pregnancy."
- "Child nutrition because of lack of parent education."
- "I have no idea."

7. Survey respondents were asked to rank the following MENTAL HEALTH ISSUES in Carteret County as a Major Problem, Somewhat of a Problem, Not a Problem, or I don't know.

Below is the ranking of the "Average Rating" score from greatest to least for "Major Problem".

1. Adult Prescription Drug Abuse
2. Illegal Drug Use
3. Alcohol Abuse
4. Youth Prescription Drug Abuse
5. Youth Illegal Drug Use
6. Tobacco Use
7. Depression/Anxiety
8. Impaired/Distracted Driving
9. Underage Drinking
10. Domestic Violence
11. ADD/ADHD/OCD
12. PTSD
13. Eating Disorders/ Body Image
14. Smoking During Pregnancy
15. Drug Use During Pregnancy
16. Suicide

Comments Question 7:

- "Access to Mental Health services/treatment."
- "Suicide amongst adolescent age group."
- "The percentage of mothers that we know use drugs during pregnancy is startling--usually near 50% in any one week--what about the un-admitted use...If they use while pregnant, what prevents them to use while breastfeeding or during childrearing? People who make poor decisions often keep making poor decisions//and these homes are often single parent, limited resources, with parents who have limited job potential and having the child limits their ability to educate themselves for improved opportunity."
- "What's key is the number of youth with mental health issues and the limited quality and number of resources for severe problems like risk of self-injury or injury of others or crisis situations--services exist to fill their schedule for profit but these issues are dumped on inadequate sectors of care providers with token but not real resources."
- "General mental health."
- "Doctor shopping."
- "Over use of our state and local services. Medicaid a big one. Folks need to really need to take a closer look at who, what, and why folks are receiving these benefits. It is so over used on the wrong folks. Our younger generation expects everything and anything that they can get their hands on for free. If you are on Medicaid you should have to have a drug test at random. I work hard for a living and have too. And if they are receiving these services they should have to be too. I am tired of working for these folks!"
- "Young parents not providing proper supervision of children."

8. Survey respondents were asked to rank the following ENVIRONMENTAL HEALTH ISSUES in Carteret County as a Major Problem, Somewhat of a Problem, Not a Problem, or I don't know.

Below is the ranking of the "Average Rating" score from greatest to least for "Major Problem."

6. Mold
7. Pest Control (Mosquitos, bed bugs)
8. Littering
9. Recycling opportunities
10. Water Pollution
11. Animal Control/Stray Animals
12. Wastewater (Sewage disposal)
13. Solid waste (Trash disposal)
14. Safe drinking water
15. Air pollution
16. Food safety
17. Lead Poisoning

Comments:

"Head Lice

"Mold varies from major to somewhat, depending on amount of rain and storms, with associated roof wall and ground seepage into buildings. The old Beaufort Elementary School being a major example!"

9. Survey respondents were asked to rank the following items as to how difficult it is to FIND OR USE any of the following in Carteret County, Extremely Difficult/Non Existent, Somewhat Difficult, Not Difficult, or I Don't Know.

Below is the ranking of the “Average Rating” score from greatest to least for “Extremely Difficult to Find or Use/Non-Existent”.

1. Access to Mental Health Care
2. Access to Drug/Alcohol Treatment
3. Public Transportation
4. Recreation Activities for Youth/Teens/Families
5. Affordable Housing
6. Affordable Childcare
7. Affordable Prescription Medications
8. Specialized Medical Care
9. Afterschool Care for School-Aged Children
10. Elder Care
11. Access to a Doctor for General Medical Care
12. Sexual Assault/ Domestic Violence Services
13. Walkable Neighborhoods with Sidewalks
14. Parks, Greenways, Bike Paths/Lanes (Pedestrian Friendly Areas)
15. Access to Dental Care
16. Interpretation Services
17. Nutrition Education Programs
18. Information on Local Events, Programs, and Activities Related to Health and Wellness
19. Information on Preventing Health Problems
20. Child Safety Seat Inspection/Installation Services
21. Community Resources, Programs, or Services for People with Disabilities
22. Smoking Cessation/Quitting Smoking Assistance
23. Home Health Care
24. Farmers Markets (Information on local fresh fruits and vegetables)

Comments Question 9:

- “The word “affordable” could be added to more than housing & childcare for more significant results to this section of survey.”
- “Extremely difficult for low income families or individuals.”
- “Need to know who takes Medicaid/Medicare in finding a doctor... need better communication between doctors...two prescribing the same med??? Leads to med sales...”
- “Great need for adult day care service for caregiver respite.”
- “We need bike paths and greenways. Most of our kids could ride bikes to school if we had adequate bike paths. That solves the problems with clogged roads in the morning with parents dropping off kids, childhood obesity and fuel prices.”
- “Many of the above services are easily found and accessed if one has good insurance, money, and transportation. This is not true only in Carteret County or NC, but the entire country.”
- “We are severely lacking in access to primary and specialized care for the un/underinsured. Mental health problems are on a significant rise in the county and we have very few resources beyond the hospital.”
- “ACCESS TO CARE (DENTAL, MEDICAL, MENTAL HEALTH, SEXUAL ASSAULT/DOMESTIC VIOLENCE, DRUG/ALCOHOL ARE DIFFICULT, BECAUSE THE ENTRY METHODS, ESPECIALLY MENTAL HEALTH, SEXUAL/DOMESTIC ABUSE, INFO ARE JUST NOT DISTRIBUTED WIDELY ENOUGH. THIS IS A DIFFICULT JOB, GRANTED, BUT CAN BE DONE THROUGH CHURCHES, NEWS REPORTS, SCHOOLS, PROVIDERS, ETC. IF ALL OF US WORK TOGETHER CAN DO BETTER AT GETTING INFO AND HELP OUT THERE. A COMMUNITY BASED INFORMATION LINE WOULD REALLY HELP ALSO.”
- “Dental care access is limited only by the fact that dentist will not see you unless you can pay in full or have dental insurance. Until the economic down turn they would only see a limited number of Medicaid patients if any at all. They are seeing more now due to their business being down. But when the economy picks up they will stop seeing them.”

10. Of the topics listed below, please choose the five (5) most important issues for Carteret County to address. "Our community needs to do more to address..."

1. Substance Abuse (Prescription Drugs, Alcohol, and Illegal Drugs)
2. Access to Mental Health Services
3. Obesity/ Overweight
4. Increase Job Opportunities
5. Increase Economic Development/ Smart Growth
6. Dental Care for Uninsured/ Underinsured
7. Public Transportation
8. High School Students Prepare for College or Employment
9. Tobacco Use/ Reduce Exposure to Secondhand Smoke
10. Domestic Violence
11. Homelessness
12. Teen Pregnancy
13. Lack of Safe Areas to Walk, Run, and Play
14. Child Abuse
15. High School Dropout Rate
16. Programs for Grandparents Raising Grandchildren
17. Suicide
18. Safer Roads and Bridges
19. Improved Access to Senior Services
20. Sexually Transmitted Diseases
21. Disaster and Emergency Preparedness
22. Gun Safety
23. Assault/ Rape
24. Adult Literacy
25. Utility Assistance for Families and Seniors

OPTIONAL: In the comment box below this question, please use this space to tell us any additional Comments, concerns, or issues you would like our planning team to review:

- “Except for mental health most of our problems core is “they can't read” consequently not able to cope in today's world and a feeling of inadequacy placing them in harm's way.”
- “Education (more teachers, smaller class sizes).”
- “Need weekend transportation for working single parents... cabs are too expensive.= \$40 for weekend?”
- “Economic Development is very important to boost incomes and to curtail dependence on military and tourism as our largest employers and economic drivers. Carteret County has great schools and our environment is perfect to raise a family.”
- “My reason for checking child abuse is not that there could be programs for that, but maybe something for parenting or more parenting support - there are a lot of malfunctioning families in this county.”
- “I would also add, but couldn't because of the “5” limit: homelessness, high school dropout rate, child abuse, high school preparation for real jobs, job opportunities and also important suicide prevention training for everyone who will take it! So many needed things, so little time and funds!”
- “There are not enough things for the high school kids to do but to get in trouble - whether it is legal or illegal! There is not a new movie theatre or putt-putt or any type of entertainment. They have to drive to Salter Path/Emerald isle or Atlantic Beach (Movie Theatre there is not that great) they need something they can enjoy locally.”
- “Mental health care, including substance abuse is a key problem but the overweight -obesity issue has the most negative impact on the most people--within ten years 50% of our young population is going to become diabetic or pre-diabetic with ripples of multiple health issues flowing from this that will drop life expectancy at least 17 years for each of these affected. Clearly and without question/easily defended--how our population eats is the most important health and happiness issue for us as individuals and collectively--for resources and economics--thoughtful eating and available affordable quality nutrition is far more critical than anything included in this survey because poor nutrition undermines health and life potential from so many perspectives.”
- “Our mental health programs in this state are broken. There are very few options for those needing mental health assistance who do not have insurance or fiscal resources to get the help needed. In care programs are all but non-existent. Prescription drug abuse has gotten out of control even with increased regulations on the medical field and dispensary businesses. Many crimes committed are tied to prescription and illegal drugs as contributing factors.
- “Real affordable housing is a big issue!”
- “Alternative energy I feel should also be addressed. My primary concern is regarding safe roadways and/or bike paths in which to run or cycle (general exercise) which would in turn help with auto pollution and promote physical wellness. A second suggestion would be dedicated moped/bicycle lanes on roadways over 45mph. This would ease traffic congestion and promote safer and less aggressive driving habits around slower vehicles.”
- “There needs to be more awareness on activities for teenagers. Programs, concerts, opportunities, trade schools, bring in short programs to attract interest for trade skills for youth or young adults, more indoor and outdoor activities for youth.”
- “I WOULD LIKED TO HAVE PUT A CHECK MARK AT MOST OF THESE, BUT SINCE FIVE WERE ASKED FOR I CHOSE THE ONES CLOSEST TO ME, WOULD STRONGLY HAVE PUT DOMESTIC VIOLENCE UP THERE TOO.”
- “Welfare fraud, abuse.”
- “Affordable elder care or services for caregivers to get the help or answers they need to properly take care of their parents is very much needed.”
- “There needs to be a data base of all helping services that available to all Income groups living in Carteret Co.”

End of Survey

2013 CARTERET COUNTY COMMUNITY OPINION SURVEY



The Carteret County Health Department and Carteret General Hospital invite you to participate in the 2013 Community Opinion Survey. The purpose of this survey is to gather your opinion on health and community issues within Carteret County.

This survey takes about 25 minutes to complete and will ask general questions related to demographics, quality of life, health behavior, how you access health services, and more.

Your responses are voluntary and confidential. All responses will be compiled together and analyzed as a group; individual responses will not be reported. Your participation is vital to identifying and addressing issues or concerns in the community.

If you have any questions or concerns, please contact Andrea Swain, Public Health Educator and Community Health Assessment Survey Coordinator, Carteret County Health Department, 252-728-8550 or andrea.swain@carteretcountygov.org. Please return completed paper surveys to the Carteret County Health Department. If you would like to take the survey online please go to www.surveymonkey.com/s/2013CHACarteret.

Thank you for your time.

Sincerely,

Dr. J.T. Garrett, Health Director
Carteret County Health Department

Quality of Life Statements

You must be at least 18 years old and a resident of Carteret County to take this survey.

If you do not qualify, please DO NOT take this survey.

1. Are you at least 18 years old? ___Yes ___No

2. Are you a full-time resident of Carteret County? ___Yes ___No

If you answered "Yes" to both of the questions above, you may begin the survey.

If you answered "No", to either of the questions above, please do not take the survey.

3. Please tell us whether you "strongly agree, agree, neutral, disagree, or strongly disagree" with each of the next 6 statements. Please check the box that best represents your opinion of each statement below.

How do you feel about these statements?	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
"There is a good healthcare system in Carteret County." <i>(Consider the cost and quality, number of options, and availability of healthcare providers in the county.)</i>	10.7%	42.9%	28.5%	15.4%	2.7%
"Carteret County is a good place to raise children." <i>(Consider the quality and safety of schools and child care programs, after school programs, and places to play in this county.)</i>	30.3%	51.7%	11.7%	5.6%	.77%
"Carteret County is a good place to grow old." <i>(Consider the county's elder-friendly housing, transportation to medical services, recreation, and services for the elderly.)</i>	26.0%	51.6%	15.4%	6.9%	.39%
"There is plenty of economic opportunity in Carteret County." <i>(Consider the number and quality of jobs, job training/higher education opportunities, and availability of affordable housing in the county.)</i>	2.5%	18.2%	27.1%	37.5%	15.0%
"Carteret County is a safe place to live." <i>(Consider how safe you feel at home, in the workplace, in schools, at playgrounds, parks, and shopping centers in the county.)</i>	29.8%	57.4%	10.7%	1.5%	.39%
"There is plenty of help for people during times of need in Carteret County." <i>(Consider social support in this county: neighbors, social groups, faith community outreach, community organizations, and emergency monetary assistance.)</i>	16.5%	49.5%	21.7%	10.4%	1.9%

Health Issues and Priorities

APPENDIX B: SURVEY RESULTS

The next set of questions will ask about community problems, issues, and services that are important to you. Remember your choices will not be linked to you in any way.

4. In your opinion, are the following HEALTH ISSUES, a major problem, somewhat of a problem, or not a problem in the community? Please review the health issues below and check the appropriate box. (*Consider whether these health issues affect people in your immediate family, neighborhood, or community.*)

Health Issues	Major Problem	Somewhat of a Problem	Not a Problem	I Don't Know
Heart disease	43.95%	35.16%	5.08%	15.82%
High blood pressure	46.77%	37.57%	3.91%	11.74%
Cancer	49.51%	32.61%	5.89%	11.98%
Stroke	26.97%	43.7%	8.27%	21.06%
Lung disease	20.16%	40.9%	13.11%	25.83%
Diabetes	50.10%	33.4%	5.11%	11.39%
Alzheimer's disease	17.68%	47.74%	8.84%	25.74%
Dental/Oral health problems	22.0%	38.9%	17.29%	21.81%
Asthma	20.78%	46.86%	12.75%	19.61%
Sexually Transmitted Diseases (<i>Gonorrhea, HIV/AIDS</i>)	10.24%	33.27%	17.52%	38.98%
Overweight and obesity	55.4%	36.35%	2.95%	5.3%
Unintentional poisonings and injuries	13.19%	31.1%	22.05%	33.66%
Infant death	2.75%	18.66%	32.61%	45.97%
Motor vehicle crashes	13.75%	54.81%	17.49%	13.95%
Pneumonia and influenza	11.83%	44.77%	17.36%	26.04%
Kidney disease	9.27%	35.9%	16.37%	38.46%

Health Issues and Priorities

APPENDIX B: SURVEY RESULTS

5. In your opinion, are the following **MENTAL AND BEHAVIORAL HEALTH ISSUES** a major problem, somewhat of a problem, or not a problem in the community? Please review the issues below and check the appropriate box.
(Consider whether these issues affect people in your immediate family, neighborhood, or community.)

Mental and Behavioral Health Issues	Major Problem	Somewhat of a Problem	Not a Problem	I Don't Know
Adult prescription drug abuse	51.38%	33.0%	6.32%	9.29%
Alcohol abuse	50.4%	37.15%	49.94%	7.51%
Illegal drug use	53.97%	32.94%	3.97%	9.13%
Suicide	11.78%	38.92%	17.96%	31.34%
Depression / Anxiety	37.65%	43.03%	4.78%	14.54%
Impaired / Distracted driving	41.15%	40.95%	6.36%	11.53%
A.D.D / A.D.H.D / O.C.D	35.93%	40.12%	7.39%	16.57%
Eating Disorders / Body Image	17.5%	45.92%	12.72%	23.86%
Underage drinking	35.71%	43.65%	5.56%	15.08%
Prescription drug abuse (Youth)	43.17%	35.05%	6.34%	15.45%
Illegal drug use (Youth)	47.21%	36.85%	4.18%	11.75%
Tobacco use (Smoking, Chewing, or Dipping)	48.61%	39.09%	5.36%	6.94%
Smoking during pregnancy	21.03%	39.09%	9.13%	30.75%
Drug use during pregnancy	20.12%	32.27%	9.96%	37.65%

Health Issues and Priorities

APPENDIX B: SURVEY RESULTS

6. In your opinion, are the following **ENVIRONMENTAL ISSUES** a major problem, somewhat of a problem, or not a problem in the community? Please review the issues below and check the appropriate box. *(Consider whether these issues affect people in your immediate family, neighborhood, or community.)*

Environmental Issues	Major Problem	Somewhat of a Problem	Not a Problem	I Don't Know
Air pollution	3.39%	26.35%	57.09%	13.17%
Water pollution	8.40%	45.60%	31.2%	14.8%
Food safety	4.19%	24.15%	55.29%	16.37%
Recycling opportunities	12.4%	29.8%	49.8%	8.0%
Littering	12.77%	53.49%	26.15%	7.58%
Lead poisoning	.6%	12.0%	41.88%	45.49%
Safe drinking water	5.41%	23.65%	55.31%	15.63%
Mold / Indoor Air Quality	21.31%	45.02%	20.72%	12.95%
Animal control / stray animals	16.17%	39.72%	33.73%	10.38%
Wastewater (Sewage) treatment and disposal	6.4%	26.8%	41.6%	25.2%
Solid waste (trash) disposal	3.61%	25.45%	55.71%	15.23%
Pest control (mosquitoes, bed bugs)	32.27%	43.03%	16.14%	8.57%

Health Issues and Priorities

APPENDIX B: SURVEY RESULTS

7. Please select the appropriate response based on how difficult it is to **FIND, ACCESS, OR USE** any of the following **PROGRAMS AND SERVICES** in Carteret County, “Extremely Difficult, Somewhat Difficult, or Not Difficult”. Please review the programs and services below and check the appropriate box.

Programs and Services	Extremely Difficult	Somewhat Difficult	Not Difficult	I Don't Know/NA
Public transportation	33.2%	29.92%	19.26%	17.62%
Recreation activities for youth / teens / families	34.98%	35.6%	21.6%	7.82%
Affordable housing	29.42%	37.86%	18.52%	14.2%
Affordable childcare	25.36%	34.43%	13.61%	26.6%
Afterschool care for school-aged children	17.11%	32.37%	21.44%	29.07%
Elder care	15.73%	33.54%	21.12%	29.61%
Information on local events, programs, and activities related to health and wellness	9.07%	29.9%	50.72%	10.31%
Parks, greenways, bike paths/lanes (pedestrian friendly areas)	15.46%	32.78%	46.8%	4.95%
Walkable neighborhoods with sidewalks	19.13%	35.34%	40.75%	4.78%
Farmers markets (local fresh fruits and vegetables)	7.64%	27.48%	59.92%	4.96%
Nutrition education programs	7.42%	32.37%	37.53%	26.68%
Information on preventing health problems	7.9%	26.82%	48.02%	17.26%
Smoking cessation/ quitting smoking assistance	8.9%	24.22%	39.54%	27.33%
Affordable prescription medications	24.84%	34.16%	27.74%	13.25%
Access to a doctor for general medical care	15.7%	27.89%	48.97%	7.44%
Specialized medical care	26.29%	35.82%	24.84%	13.04%
Access to dental care	15.11%	25.26%	50.93%	8.7%
Access to mental health care	36.98%	20.66%	19.21%	23.14%
Access to drug/alcohol treatment	28.51%	19.21%	21.28%	30.99%
Sexual assault/ Domestic violence services	9.98%	24.32%	29.52%	36.17%
Child safety seat inspection services	8.28%	22.57%	30.23%	38.92%
Interpretation services	8.35%	23.59%	21.5%	46.56%
Community resources, programs, or services for people with disabilities	14.73%	27.39%	22.41%	35.48%

8. What do you think are the FIVE (5) most important overall issues for Carteret County to address?

"Our community needs to do more to address..." *(Please choose only five)*

Rank	Number of Votes	Choose the five most important issues to address
	83	Tobacco use / Reduce exposure to secondhand smoke
3	209	Obesity / Overweight
4	182	Access to mental health services
	48	Suicide
2	249	Substance abuse (Prescription Drugs, Alcohol, Illegal Drugs)
	46	Improved access to Senior Services
	82	Child abuse
	42	Gun safety
	106	Dental care for uninsured / underinsured
	74	Domestic violence
	13	Assault / rape
	82	Lack of safe areas to walk, run, and play
	21	Sexually Transmitted Diseases
	65	Disaster and emergency preparedness
	107	High school students prepared for college or employment
	54	Safer roads and bridges
	83	Public transportation
5	138	Increase economic development / smart growth
1	253	Increase job opportunities
	65	Homelessness
	43	Utility assistance for families and seniors
	53	High school dropout rate
	27	Adult literacy
	38	Programs for Grandparents raising grandchildren

If there are other issues that you feel are a priority, but are not listed above, please list them here.

Activities for Youth and Families:

"Recreation for children, bowling, skating rink."

"Kids have nowhere to go or nothing to do in the downeast area."

"Build teen centers, skating rinks, arcades, movie theaters, etc... The youth need outlets to be kids and stay away from drugs, gangs, and violence..."

"Affordable local things for families with school-aged children to do."

"Safe activities for youth in this county. There is nothing to do but drink, drugs, and party!"

Access to Care/ Quality of Care

"A community hospital that actually supplies the primary care needs of the community and is not focused on increasing the profit margin based on outpatient patient revenue sources."

"Improvement with service at Carteret General Hospital, cleaning of hospital emergency room, education of all EMT."

"Access to vaccinations - free or reduced Access to free or reduced yearly care, PAPS, Wellness, Child Care."

"More access to health care for working poor. "

"I have no insurance and are not strong enough to work 2 or 3 jobs, because I have some physical issues that will never be addressed because I'm poor."

" Not enough medical doctors."

"Health Insurance for people who are uninsured, cannot afford health insurance, but are not eligible for public assistance."

"Geriatric practitioners."

"Doctors who will take senior citizens."

"Better health care, similar to that of Greenville."

"Mental Health/Behavior Health issues are a growing problem nationwide. Neither Carteret County or Carteret General Hospital are prepared, equipped, nor supported by the community to meet the needs of these patients. At best - the hospital (mainly the ED) provides a temporary solution for these patients. The ED provides excellent care for these patients, but again, are limited by space, trained professional staff for these patients, and community support. It is difficult to assess, in my opinion, if the mental/behavioral health issue is independent from the rampant substance abuse within our county. It appears that the two issues go hand in hand. By reducing the substance abuse issue, it is highly likely that the mental/behavior health issue will be reduced as well."

Affordable Housing:

"Our county lacks affordable health care and affordable housing."

"NEED MORE AFFORDABLE HOUSING! Comparing the average housing costs (rent and purchase) of homes in Carteret County to Wake County (including Raleigh, the state capitol), housing is much more affordable in Wake County. 2. NEED INCREASE IN INCOME for people who are NOT considered "management." Again, average income in Carteret compared to Wake County is significantly different. Income is much lower here, yet cost of living is significantly higher. 3. NEED MORE JOB OPPORTUNITIES, WITH BETTER PAY RATES. If someone has no college degree, they rarely have a chance of obtaining a job that pays above \$7/hr. Who can live on that?"

"Housing for people on a limited income and have pets...very few options are out there unless it is out of their budget so we need more budget friendly and pet friendly housing!"

Environment/ Animal Control/ Public Safety:

"Continued spay/neuter problems."

"Animal control/assistance controlling the stray population especially in rural areas of the county."

"Environmental protection."

"This county should focus on recycling. From what I've seen there are little to no recycling options."

"Crime/theft."

Special Needs:

"We need more help for special needs children in the school system downeast (Smyrna)."

"Elder day care."

"Programs/therapies/opportunities for children, adolescents, and adults living with developmental and mental health disabilities. As of right now, there are no programs, few therapists, and limited opportunities for children with autism, for example."

"Help with handicapped adult children."

Economic Development/Job Opportunities

"Wages are very low in this county."

"Tax rates in the county/state are among the highest anywhere. This includes insurance for homes and health. They NEED TO BE LOWERED! People who work are now spending more than ever on gas, food, medical services, electricity and clothing. The taxes are robbing the people of all they have left. So, why should a person work if the gov't is going to take the money away....we should all just live off the gov't for free!!!!!!!"

"Increase minimum wage."

"THE OTHER IMPORTANT OPTION I THINK IS TO INCREASE JOB OPPORTUNITIES. THANK YOU."

"Winter Months in Carteret County! Look into ways to help local residents during the winter months in Carteret County including business owners. Everyone that does not have a government job suffers due to layoffs - due to lack of visitors. Promote Carteret County for Winter time travel as well this would help business stay in business and keep people in their jobs vs. on the unemployment line. 2. Carteret County seems to me to be a clique, it's a who you know community. We are small enough to promote, encourage and accomplish a family type

atmosphere. Everyone's opinions are important. For example many will not take 25 mins to fill out this survey because their opinions and pleas for help have fallen on deaf ears way to many times. 3. Revitalize downtown Morehead and Atlantic Beach. I am not saying bring back the old circle, I think that was a mess only inviting drugs and crime. What I am saying is the county should step in and require that projects be completed in a time frame, that we need to keep with a theme throughout the county. We have so many things popping up all over the place. We look like the island of misfits. Downtown Morehead needs a facelift on the front of each building. make it a walking and shopping friendly area that fits a theme give it some charm and class and fill it with affordable shopping. Local Business owners. A real general store, an old fashion pharmacy with a soda fountain, I realize you have no control over that however we can find business owners and approach them with an idea such as this. The same with Atlantic Beach, it looks like a war zone. Take a ride, Start in Emerald Isle, picture perfect and pristine, travel down the island to Salter Path/Indian Beach, which has been left alone un maintained by the state, no sidewalks, nothing left... hit Pine Knoll Shores back to pristine, get to Atlantic Beach and you've entered the slums. People visiting Emerald Isle respect the beach and the property because that's what they see. Not true for Atlantic Beach. Health Care on the island... none. There should be a 24 hour Urgent Care or ER building for residents and tourist in the summer months at the very least."

Other Comments:

"We need more areas like the bike path for people to run/walk/bike on. This would be awesome!"

"Diabetes."

"Family Promise is an excellent resource for homelessness. Please continue to help this agency thrive."

"Drinking and driving particularly in the down east rural areas."

"Teen Pregnancy." (listed 7 times)

"An affordable lawyer willing to help someone like me so I can get my kids back and custody full-time."

These next questions are about what health information you feel is needed by you, your family members and household, and by people in the community. Remember, the answers you give for this survey will not be linked to you in any way.

9. Which of the following health behaviors and topics do you feel people in your community, neighborhood, or family need more information about?

Please choose the top three behaviors from the list below. *(Choose only three.)*

Rank	Number of Votes	Health Behaviors
	43	Preventing pregnancy and STD (Sexually Transmitted Diseases)
	14	Getting flu shots and other vaccines
	12	Getting prenatal care during pregnancy
	69	Going to doctor for yearly check-ups and health screenings
	44	Going to dentist for teeth cleaning and preventive care
	48	Domestic violence prevention
	27	Rape/Sexual abuse prevention
	59	Crime prevention
	58	Preparing for an emergency or natural disaster
	11	Child Safety Seat Installation
	68	Caring for elderly
	42	Caring for family members with special needs/ disabilities
	50	Parenting/ Grandparents parenting
1	150	Preventing substance abuse in youth
	32	Suicide prevention
	48	Anger management
2	117	Eating well/ Good nutrition
	82	Exercising/ fitness
	99	Managing weight
3	106	Stress management
	63	Quitting smoking/ tobacco
	16	*None, No information is needed

If you would like to write down a different health behavior that is not listed, please do so here.

Other Topics:

Drug Abuse

ADHD

Money management

Adoption and Foster Parenting

Addiction to prescription medication

Diabetes

Getting help with finances

Early intervention-learning

Mental Health

10. Where do you get health information (e.g. information on health care resources, educational information, community programs, etc)? *(Please check the 3 you use most often.)*

- | | |
|--------------------------------------|----------------------------------------|
| a. <u>51.79%</u> Friends/family | g. <u>22.32%</u> Local Newspaper |
| b. <u>64.96%</u> Healthcare provider | h. <u>10.71%</u> Health department |
| c. <u>3.79%</u> Churches | i. <u>3.35%</u> Social service offices |
| d. <u>19.87%</u> Hospital | j. <u>12.72%</u> Books/Magazines |
| e. <u>60.71%</u> Internet | k. <u>19.64%</u> TV News |
| f. <u>5.13%</u> Radio | l. <u>.03%</u> Other(Please specify): |

University Courses

Drug Store/Pharmacy

Library

Gym

Scholarly Articles/ Medical Research

Health Insurance Provider

11. What health topic(s), environmental health issues, or disease(s) would you like to learn more about?

Addictions (3)	Lung Disease/ COPD
Affordable Care/Prescriptions (2)	Mental Health/Mental Illness (20)
Airborne illnesses (How to protect against)	Migraines
Alternative Health/ Spirituality and Health (3)	Nutrition on a budget (5)
Alzheimer's / Aging/ Prevention/Delaying Dementia (3)	Obesity
Anxiety/ ADHD	Overall Wellness
Arthritis (Disc Damage)	Physical Activity/Exercise
Back exercises	Pregnancy after age 40
Cancer / Cancer Prevention (10)	Quality of city water/ Water quality/ Air Quality (4)
Child car seat safety/ Child Health (7)	Stoke (4)
Child Wellness and Health Promotion	Storm water run off
Chronic Ulcers	Stress Management (4)
Heart Disease /Cardiac Issues (6)	Suicide Prevention (4)
Hep C	Substance abuse (8)
High Cholesterol/ High Blood Pressure	Weight Management/ Weight Control (10)
HPV	

Comments from Question 11:

"Skin Cancer- Given the jobs of most people in this area, I would like to hear more about this in the news and/or doctors' offices."

"Services available in community for individuals who have no insurance and are disabled."

"Should have different health topics or services every month, needs to be informed on bulletin board at Library few months or do all information six months in advance..."

"Health Dept. needs to do more outreach programs, maybe set up tables at local places like Wal-Mart and do screenings. Have classes on controlling diabetes, classes for overweight people. Let our Health Department become proactive."

"Explanation of what is to be expected from "OBAMA CARE", no one seems to know."

Comments from Question 11 Continued:

"Cafeteria food should put food labels on all foods that they serve, i.e. Ingredients listings"

"Instead of pushing prescription pills, proper nutrition and other health care treatments such as integrative health care, nutritionists and exercising should be sought after first. Too many people want a quick fix when really they need to help themselves by doing what is best for themselves. Pill popping and selling in this community is everywhere from our schools to the homes."

"Weight and its effect on personal health."

"Learning to eat well on a low income food budget."

"Community fund raising events for local needs."

"Fibromyalgia and its care."

"Natural herb/spices home remedies."

"Preventative measures to maintain health, ie. Screenings, diet, exercise)."

"Mental health availability and where professionals, law, and EMS representatives can turn for immediate help for those clearly in need. "

"Where the elderly can receive more in home care when they are re-adjusting back in their homes from operations or rehab. May just need someone to talk with and run errands while the children are at work or away."

"Where and how you can access mental health and behavior therapy."

"Chronic fatigue syndrome and chronic pain syndrome."

"Mental health illness and how to cope."

"Nutritional information for children and adults that is paired with simple exercise routines."

"Importance of caring for pregnant women and their children."

"Senior citizens activities in the western part of the county."

"Community organizations and activities that support an active lifestyle."

"Menopause and what supplement to take after 50."

"Skills preparation for parents to raise their students to be independent contributing members of our society, county, state, and world! Dangers of ignoring your children when they are young!"

"How to be more preventative/proactive about living healthy."

"Carteret County needs a program for the mental health issues of very young children (age 3-5) who are not yet in school. Child cares in the county need to be trained in ways to help these children."

"Domestic Violence prevention."

Comments from Question 11 Continued:

"How to help people who have addiction problems so they can return to becoming productive citizens."

"Caring for mentally handicapped adult children in the home; services available to offset costs other than Medicaid and SSI."

"Understanding thyroid."

"Cancer clusters in the downcast Atlantic community. I think someone needs to investigate the possible toxic pollution that could be coming from past use of chemicals on the Airbase. Too many families have been affected by cancer and there could be contamination seeping into the water supply like in Jacksonville."

"How to manage the large amounts of guns in our county so that an individual crisis does not turn into a large scale tragedy."

"Why do CEOs and corrupt hospital boards determine what is best for the medical needs of a community."

12. Do you have children under the age of 19 for which you are a primary caretaker? (Includes step-children, grandchildren, or other relatives which live in your home.)

37.37% Yes (*go to -12A-*)

62.63% No (*If no, skip to question 13*)

12.A. If yes, which of the following health topics do you think your child/children need(s) more information about? (*Check all that apply*)

a. 34.21% Dental hygiene

f. 23.68% Tobacco

k. 44.74% Prescription Drug Abuse

b. 53.29% Nutrition

g. 22.37% STDs

l. 31.58% Reckless driving/speeding

c. 13.16% Eating disorders

h. 34.87% Sexual health

m. 34.87% Mental health issues

d. 3.95% Asthma management

i. 33.55% Alcohol

n. 21.71% Suicide prevention

e. 7.89% Diabetes management

j. 52.63% Bullying

o. 7.89% Other listed below:

Other: High cholesterol
Headaches/Migraines
Exercise

Divorce Issues
Teen Pregnancy

Anger management
Stress Management

Comments:

"Too young for any of these."

"Schools need to have better menu for kids. Even the newer options are supposed to be better but they still offer slushies and Gatorade and things like that...they are LOADED with sugar. Why do they think these need to be taught to our kids during schools hours, especially since they think half the school is ADD or ADHD? "

"Bullying is overdone with in the local school."

These next questions are about your own personal health and how you access health care services. Remember, the answers you give for this survey will not be linked to you in any way.

13. In general, how would you rate your overall health?

11.06% Excellent
38.61% Very good
34.27% Good
12.36% Fair
3.69% Poor

14. Have you ever been told by a doctor, nurse, or other health professional that you have any of the health conditions? Check Yes or No for each condition.

	Yes	No
l. Asthma	<u>12.42%</u>	<u>87.58%</u>
m. Depression or anxiety	<u>30.68%</u>	<u>69.32%</u>
n. High blood pressure	<u>36.62%</u>	<u>63.38%</u>
o. High cholesterol	<u>31.79%</u>	<u>68.21%</u>
p. Diabetes (not during pregnancy)	<u>14.16%</u>	<u>85.84%</u>
q. Osteoporosis	<u>7.74%</u>	<u>92.26%</u>
r. Overweight/Obesity	<u>41.32%</u>	<u>58.68%</u>
s. Angina/ heart disease	<u>9.07%</u>	<u>90.93%</u>
t. Cancer	<u>10.38%</u>	<u>89.62%</u>
u. Addiction	<u>3.11%</u>	<u>96.89%</u>
v. COPD/Lung Disease	<u>6.21%</u>	<u>93.79%</u>

15. In the past 30 days, have there been any days when feeling sad or worried kept you from going about your normal business?

17.83% Yes 80.22% No 1.96% Don't know/ Not sure

16. In the past 30 days, have you had any physical pain or health problems that made it hard for you to do your usual activities such as driving, working around the house, or going to work?

30.15% Yes 69.41% No .43% Don't know/ Not sure

17. During a normal week, other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour?

69.63% Yes *(go to -17A, Then 17 B-)*

30.37% No *(if no, skip to question -17C-)*

17.A. If yes, how many times do you exercise in a typical week? (If you exercise more than once a day, count each separate physical activity that lasts for at least a half hour to be one "time.")
 times per week.

Once a week 4.70%

2 to 3 times a week 44.97%

4 to 5 times a week 34.90%

More than 5 times a week 14.43%

17.B. If yes, where do you exercise or engage in physical activity? *(Check all that apply)*

a. 1.6% Church gym/Recreation Center

b. 59.62% Outdoors / Park

c. 3.53% Public Recreation Center

d. 30.13% Gym or Fitness Center (Membership)

e. 66.99% Home

f. .07% Other: **Work/Office Gym, School**

17.C. If no, what keeps you from exercising for at least 30 mins during a normal week?

(Please select your top three reasons)

a. 27.19% My job is physical or hard labor.

b. 7.89% Exercise is not important to me.

c. 10.53% I don't have access to a facility that has the things I need, like a pool, golf course, or a track.

d. 18.42% I don't have enough time to exercise.

e. 8.77% I would need child care and I don't have it.

f. 8.77% I don't know how to find exercise partners.

g. 31.58% I don't like to exercise.

h. 20.18% It costs too much to exercise.

i. 6.14% There is no safe place to exercise.

j. 50.88% I'm too tired to exercise.

k. 14.91% I have a disability.

l. 7.02% I don't know.

m. 31.58% Other: **No motivation/ lazy Injury/pain**

18. When in season, where do you typically get fresh fruits and vegetables? *(Choose two)*

a. 78.51% Grocery store

b. 60.53% Farmers market/Local Farm Stand

c. 24.12% I grow my own

d. 0.88% Co-op Buying Program

e. 6.36% Neighbor's Garden

f. 0.22% N/A I don't eat or purchase fruits and vegetables

19. In a typical day, how many cups of vegetables do you eat? For example: 12 baby carrots, a small salad, and 1 cup green beans would be 3 cups a day. (Please do not include french fries and other fried vegetables in your estimate.)

2.43% 0 30.97% 1 cup 37.17% 2 cups 20.58% 3 cups 6.64% 4 cups 2.21% 5 cups

20. In a typical day, how many cups of fruit do you eat? For example, 1 banana and a small apple would be 2 cups of fruit. (Please do not include fruit juice you drink).

12.22% 0 44.89% 1 cup 29.33% 2 cups 9.78% 3 cups 2.44% 4 cups 1.33% 5 cups

21. In a typical day, how many cups of 100% fruit juice do you drink? For example, a cup of orange juice with breakfast and a cup of cranberry juice with lunch would be 2 cups per day.

54.67% 0 32.44% 1 cup 8.89% 2 cups 3.11% 3 cups 0.67% 4 cups 0.22% 5 cups

22. Have you been exposed to secondhand smoke in the past year?

62.50% Yes 34.65% No 2.85% Don't know/ Not sure

23. Do you currently smoke cigarettes or use tobacco products, including in social settings?

18.14% Yes *(go to -23A-)* 81.86% No *(If no, skip to question 24)*

23.A. If yes, where is the first place you would go if you wanted to quit? *(Choose only one)*

- | | |
|-------------------------------------------------|-----------------------------------------------------------|
| a. <u>.3.8%</u> 1-800-QUIT NOW
(NC QUITLINE) | f. <u>2.53%</u> Health Department |
| b. <u>32.91%</u> Primary Care Doctor | g. <u>6.33%</u> Hospital |
| c. <u>2.53%</u> Pastor/ Church | h. <u>7.59%</u> I don't know where to go |
| d. <u>6.33%</u> Pharmacy / Pharmacist | i. <u>36.71%</u> Not I would just stop using, quit cold t |
| e. <u>1.27%</u> Private Therapist / Counselor | j. <u>2.53%</u> Other: Hypnotist, Clinic |

24. During the past 12 months, have you had a seasonal flu vaccine? This can be a "flu shot" injected into your arm, or spray like "FluMist" which is sprayed into your nose.

58.28% Yes 40.62% No 1.10% Don't know/Not sure

25. Where do you go most often when you are sick or not feeling well? (*Choose only one*)

- | | |
|------------------------------------------------|-----------------------------------------------|
| a. <u>73.55%</u> Primary Care Doctor | e. <u>1.16%</u> Military Base Hospital/Clinic |
| b. <u>1.39%</u> Health department | f. <u>15.08%</u> Urgent Care Center |
| c. <u>4.64%</u> Emergency Department, Hospital | g. <u>0</u> VA Clinic |
| d. <u>4.18%</u> Broad Street Clinic | h. <u>4.64%</u> Other: <u>listed below</u> |

Comments:

"No insurance, so I don't go to the doctor."

"High deductible insurance, choose not to seek care."

"I don't have insurance...so I suffer ☹️."

"Drug Store..." "Pharmacy..."

"Can't afford to go to the doctor."

"Stay in bed..." "Stay home..."

"Craven County Hospital."

"OBGYN is my primary care doctor..."

"Don't go..."

"Jesus and the doctor..."

26. Do you have health insurance?

82.10% Yes (*Go to- 26A*) 17.90% No (*If no, skip to question 27*)

26A. If yes, what is your primary health insurance plan? This is the plan which pays the medical bills first or pays most of the medical bills? (*Please choose only one*)

[**Note:** The State Employee Health Plan is also called the "North Carolina Teacher's and Employee Health Plan." Medicare is a federal health insurance program for people 65 and older or some younger people with disabilities. Medicaid is a state health insurance program for families and individuals with limited financial resources or special circumstances.]

- a. 27.66% The State Employee Health Plan
- b. 51.86% Blue Cross and Blue Shield
- c. 5.59% Other private health insurance plan purchased from employer or workplace
- d. 1.06% Other private health insurance plan purchased directly from an insurance company
- e. 8.51% Medicare
- f. 2.13% Medicaid or Carolina ACCESS or Health Choice 55
- g. 3.19% The military, Tricare, CHAMPUS, or the VA
- h. 0% The Indian Health Service
- i. 3.45% Other plan

27. In the past 12 months, have you, or anyone in your household had trouble getting needed medical care from any type of health care provider, dentist, pharmacy, or other facility?

24.67% Yes (*go to -27A, then 27B-*) 75.33% No (*If no, skip to question 28*)

27A. If yes, what type of provider or facility did you or your family member have trouble getting health care from? If there was a provider that you tried to see, but we do not have listed here, please write it in. *(You can choose as many of these as you need to.)*

- a. 55.75% Dentist
- b. 33.63% General practitioner
- c. 18.58% Eye care/ optometrist/ ophthalmologist
- d. 15.04% Pharmacy/ prescriptions
- e. .88% Pediatrician
- f. 5.31% OB/GYN
- g. 2.64% Health department
- h. 7.96% Hospital
- i. 5.31% Urgent Care Center
- j. 3.54% VA Clinic/Hospital
- k. 0 Military Hospital/Clinic
- l. 5.31% Mental Health Provider
- m. 19.47% Other/Specialist *(What type?)* Type listed below:

Back Specialist
Endodontist
Gastroenterologist (3)
Dermatologist
Autism Therapy

Orthopedic Dr (2)
Wound Healing
Podiatrist
Rheumatologist/Arthritis (3)

Neurologist (2)
Physical Therapist
Pain Specialist
Cardiologist

27B. Which of these problems prevented you or your family member from getting the necessary health care? If you had a problem that we do not have written here, please write it in. *(You can choose as many of these as you need to.)*

- a. 45.61% No health insurance.
- b. 50.88% No dental insurance.
- c. 17.54% Insurance didn't cover what I/we needed.
- d. 57.89% The cost was too high.
- e. 8.77% Doctor would not take my/our insurance or Medicaid.
- f. 1.75% Hospital would not take my/our insurance.
- g. 1.75% Pharmacy would not take my/our insurance or Medicaid.
- h. 3.51% Dentist would not take my/our insurance or Medicaid.
- i. 5.26% No way to get to the doctor/appointment.
- j. 7.89% Didn't know where to go.
- k. 14.91% Couldn't get an appointment.
- l. 18.42% The wait was too long.
- m. 10.52% Other: Comments listed below

Comments Question 27B:

“Have Medicaid card, but have to build up \$4800 before it would be usable again.”

“Doctors need better office receptionist, most of them don’t know or care to help patients.”

“Hospital has no hospitalists and no choice of specialists.”

“The doctor was not seeing patients that day at East Carteret Family Medicine.”

“My co-pay is 81 dollars and I make 1300 a month.”

“Pharmacy not open late at night.”

“Needed a primary care physician, very difficult to find one that would accept self-pay, and medication costs were too high to purchase.”

“Insurance denied procedure.”

“Walk-in clinics would not accept insurance.

“No doctors in the area were taking on new patients for a family member who did not have a primary care physician to be seen.

“Worker’s comp. injury; the provider was not affiliated with the company and would only see him if he waived his worker’s comp. rights.”

“Because we didn’t have Medicaid and we made too much money per DSS we couldn’t get our child the help he needs.”

28. If a friend or family member needed counseling for a mental health or drug or alcohol abuse problem, who is the first person you would tell them to talk to? *(Please choose only one.)*

- | | |
|---------------------------------------------------|----------------------------------------------|
| a. <u>25.88%</u> Private counselor or therapist | e. <u>5.23%</u> Another family member |
| b. <u>7.27%</u> Support group (e.g., AA, Al-Anon) | f. <u>14.32%</u> Minister/religious official |
| c. <u>1.36%</u> School counselor | g. <u>14.32%</u> Don't know |
| d. <u>31.82%</u> Doctor | h. <u>2.50%</u> Other |

29. In the past year, have you taken any prescription medication that was not specifically prescribed for you by a medical professional? 4.88% Yes 95.12% No

30. Do you have medication that is expired, unused, or no longer needed in your medicine cabinet at home?

29.52% Yes *(go to -30A-)* 70.48% No *(if no, skip to question 31)*

30.A. For what reasons are you holding on to medication that is expired, unused, or no longer needed by anyone in your home? *(Check all that apply)*

- 23.73% I don't want to flush it down the toilet
- 31.36% I don't want to put it in the trash
- 29.66% I don't know where to safely dispose of the medication
- 59.32% I might need it again or I can give it to another family member

31. If you wanted to dispose of expired, unused, or no longer needed medications, how would you do so? *(Check all that apply)*

- 23.42% Flush down the toilet
- 23.19% Toss in the trash
- 6.09% Mix with coffee grounds, or kitty litter and put in trash
- 47.31% Drop off during medicine take-back or community collection events
- 4.45% Other: listed below

Comments:

"Not sure, that's why it's currently under lock and key."

"Not sure what the correct method of disposal is...This is info that should be made aware to the public. In the past, I have flushed down the toilet, although I now know this is not good for the environment."

"Dispose at local hospital or pharmacy?"

"Nothing. I would keep it."

"I dealt with this when a relative passed away. The local hospital pharmacy was not even sure what I should do with the numerous full prescription bottles. I thought they had the capacity to destroy them but they told me to fill with water."

"Grind then flush."

Comments Question 31 continued:

"Drop off at Sheriff's Office."

"Take it to the dump."

"I tried to drop them off at the Newport PD, but was directed to Beaufort, and I haven't gotten around to that yet... (Months ago)."

"Contact the Sheriff."

"I don't know."

"Toss in the trash."

"Talk with my pharmacy."

32. Do you know you can safely dispose of any unused, expired, or unwanted medications by contacting the Carteret County Sheriff's office? 56.89% Yes 43.11% No

33. At what age do you think it is "OK" for a youth to drink/experiment with alcohol? _____ *(Enter age)*
Never 9.67%

13 to 17 years old 3.30%

18 to 20 years old 26.65%

21 years old 54.95%

Over 21 years 4.48%

34. How do you store and secure prescription drugs and alcohol within the home? Please indicate whether you lock up your prescription medication and/ or alcohol within your home. *(Choose only one)*

14.54% Yes, **BOTH**, prescription medication and alcohol are in a secure/locked cabinet

12.08% Yes, **Prescriptions ONLY** are in a secure/locked cabinet

1.12% Yes, **Alcohol ONLY** is in a secure/locked cabinet

63.09% No, I do not secure or lock up either of those items

9.17% NA, I do not have either of those in my home

Cancer Care and Treatment

APPENDIX B: SURVEY RESULTS

35. Do you feel you have access to information about cancer care and treatment options available in Carteret County? 69.06% Yes 30.94% No

36. Are you aware that Carteret General Hospital has partnered with UNC Lineberger Comprehensive Cancer Center to provide additional cancer services to the Carteret County?
32.37% Yes 67.63% No

37. Would you feel comfortable receiving cancer care in Carteret County? 55.13% Yes 44.87% No
*******Only 8.90% of survey respondents had ever been diagnosed with cancer.*****

38. If you were diagnosed with cancer while a resident of Carteret County, did you choose to travel outside of the county to receive cancer care or treatment?
71.74% Yes 21.74% No 6.52% N/A I was not diagnosed with cancer while a resident of Carteret

Of that 8.9% 71.74% chose to travel out of the county for treatment, 21.74% stayed in-county, and 6.52% stated they were not diagnosed while a resident of Carteret County.

If Yes, why? _____ listed below

Comments:

"Better care."

"Go to a larger facility."

"I trust Duke and ECU."

"Better care in Chapel Hill."

"Wanted a specific doctor. More options."

"More options at ECU, DUKE, and UNC."

"Carteret takes too long for service."

"Sought second opinion at Duke."

"Alternative medicine cancer care and treatment."

"I lived in SC for 30 years and prefer the services of SC Oncology Associates."

"Diagnosed outside of county and doctor recommended specialist outside of county."

Specialized treatment not available, (Moh's skin cancer excision)."

"Better care, always get a second opinion."

"At the time services were not available in Carteret County."

"MD recommended such referral."

"That's where my doctors were."

"My doctor is in New Bern."

"Was ignored by my Primary Care person and not given adequate intervention, support. Was told to wait 2 weeks to get a biopsy of breast after suspected cancer was seen in mammogram. No empathy from professionals and do not trust them to save my life or cure my cancer. Heard of many people dying because disease was not adequately treated or diagnosed."

Emergency Preparedness

APPENDIX B: SURVEY RESULTS

39. Does your household have working smoke detectors? 95.99% Yes 4.01% No
40. Does your household have working carbon monoxide detectors? 35.12% Yes 64.87% No

41. Does your family have a basic emergency supply kit? (These kits include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlight and batteries, non-electric can opener, blanket, etc.)

59.96% Yes (*go to -41A-*) 39.82% No (*If no, skip to question 42*)

41A. If yes, how many days do you have supplies for? ____ (*Write number of days*)

Not Sure 2.75% 2-3 days 30.20% 4-7 days 44.31% 8-20 days 16.08% 21+ days 6.27%

42. What would be your main way of getting information from authorities in a large-scale disaster or emergency?
(*Check only one*)

40.27% Television 2.06% Neighbors 8.24% Text message (emergency alert system)
10.53% Internet 29.06% Radio .46% Newspaper 3.89% Social Media (Facebook/Twitter)
2.29% I don't know
3.20% Other (describe): HAM radio, VHF, Combination of several of above, all of the above

43. If public authorities announced a mandatory evacuation from your neighborhood or community due to a large-scale disaster or emergency, would you evacuate?

76.54% Yes (*If yes, skip to question 44*) 15.44% No (*Go to -43A-*)

43A. If no, what would be the main reason you might not evacuate if asked to do so? (*Check only one*)

a. 6.58% Lack of transportation f. 3.95% Concern about traffic jams or inability to get out
b. 6.58% Lack of trust in public officials g. 2.63% Health problems (could not be moved)
c. 40.79% Concern about leaving property behind h. 7.89% Concern about family safety
d. 1.32% Concern about personal safety i. 10.53% Don't know/ Not sure
e. 19.74% Concern about leaving pets j. 23.68% Other: listed below

Comments:

"It depends on where storm was located and its intensity."

"Stay behind for work." (9)

"Concern about being allowed to return to my house."

"Concern about how and when I could return to my property."

"Stay locked down with family."

"Lack of funds, do not have the money for hotel and no family in the area."

"Costs too much, and don't want to leave my pets."

"I would not leave my pets at any time."

"My house is on stilts."

"The cost to evacuate is very high and the authorities keep you away from your home too long. Area motels should lower the cost to locals instead of raising them! It costs us \$100 for one night at a motel in Morehead City."

44. Of the County's 14 park facilities, check which ones have you visited in the past 12 months?

(Mark all that apply) 62% of the survey respondents answered this question.

Park Facilities	✓	Park Facilities	✓
Freedom Park (Beaufort)	26.74%	Eastern Park (Smyrna)	15.41%
Western Park (Cedar Point)	22.09%	Fort Benjamin Park (Newport)	39.24%
Salter Path Beach Access	10.47%	Straits Fishing Pier	4.07%
Salter Path Park	2.62%	South River Park (Merrimon)	2.33%
Radio Island (Beach Access)*	32.56%	Mariners Park (Sea Level)	2.33%
Swinson Park	41.28%	Harkers Island Beach Access	11.34%
West Beaufort Boat Access	17.15%	Marshallberg Picnic Area	3.49%

*Pier at Radio Island is not part of Carteret County Parks and Recreation Facilities.

45.A Please Rank the TOP 3 types of RECREATIONAL FACILITIES you would like to see more of in Carteret County:

76% of the survey respondents answered this question.

Recreation Facilities (CHOOSE 3)	# Votes	Rank
Parks (Playgrounds, Picnic Shelters)	196	2
Athletic Fields (Soccer, Football, Baseball /Softball)	72	8
Athletic Courts (Tennis, basketball, volleyball)	88	7
Trails	167	4
Aquatic facilities (Pools or splash parks)	239	1
Recreation Centers	170	3
Open Space	91	6
Dog Parks	133	5
Skateboard Parks/ Skate Spots	60	9

Comments Question 45 A:

Entertainment Venues:

"Drive In-Movie Theater"

"Bowling alley."

"Places for kids to go." (2)

"Skating rink or bowling alley."

"Kids need something to do. They have no recreation area to keep them busy. They get in trouble and we wonder why. Skating ring and bowling have been taken away for shopping centers. Just makes no sense."

"Public roller skating and/or ice-skating rinks. Public Centers with low-cost family fun activities."

"Activities for kids."

"A movie theater in Morehead City or Beaufort. A roller skating ring again MHC or Beaufort. A bowling alley in MHC or Beaufort."

"Bowling alley, skating rink, arcade—target youth and tourists with families."

"Bowling, Putt Putt Golf, Skating Rink."

"Somewhere for teens to hang out and be safe."

Beach/Piers/Boat Ramps:

"Beach access for locals."

"Free beach access would be my main request."

"Free Public Beach Access."

"Beach access with bathrooms."

"Boat Ramps." (2)

"More boat ramps."

"More parking spaces with water view."

"Fishing Piers" (2)

Bike Trails/ Paths/Shoulders

"Bike Trails."

"Mountain bike trails."

"Bike riding trails."

"More bike trails."

"Adequate highway shoulders for biking."

"Bike paths would be my number one choice. We need more places to ride safely."

"We really need better bike paths other than the standard sidewalks within MHC city limits."

Fitness:

"Aerobic Classes."

"Obstacle course/cross fit field."

Comments Question 45A Continued:**Running/Walking Paths & Tracks**

“Add more trails for runners, walkers, and bikers!”

“1/4 mile track.”

“Jogging paths.”

“400M track access at the high schools.”

“Walking Parks, not trails because the trails are not maintained for example the one in Atlantic Beach, you need a case of bug repellent.”

Other:

“Spas. Public Pools.”

“Any of those would be great!.”

“Shooting Range.”

“It has to be in WESTERN, not MHC or Newport or Beaufort!

“Affordable campgrounds for locals.”

I believe we have some spacious parks and rec facilities in the county but they need to be maintained better particularly the Smyrna- Eastern Park.”

45.B Please Rank the TOP 3 types of RECREATIONAL PROGRAMS you would like to see more of in Carteret County:

76% of the survey respondents answered this question.

Recreational Programs (CHOOSE 3)	# Votes	Rank
Adventure programs (canoeing, backpacking)	189	2
Afterschool programs	192	1
Athletic programs	81	8
Fitness programs	187	3
Art programs	117	6
Social programs	136	5
Nature programs	142	4
Group trip opportunities (1or 2 day trips)	100	7
Group travel opportunities (3 or more nights)	45	9

Comments Question 45B:

Special Population Programming:

“Programs for children under the age of 10, and also something for pre-school aged children.”

“Summer camps for kids.”

“Affordable summer programs.”

Anything for teens to stay focused.”

“Programs for people with disabilities.”

Programming:

“Crossfit, extreme sports, triathlons.”

“More adult team leagues. There is no basketball leagues for adults.”

“Fishing programs.”

“Swimming programs.” (2)

“Swimming teams, programs, and PUBLIC POOLS.”

“Sailing program.”

Other Comments:

“Place to play cards.”

“Gardening at Home programs.”

“Pet saving programs.”

“YMCA.”

“All of the above if they are affordable. Most of us cannot afford the prices that are usually charged.”

“If these were free, I would use all of them.”

“Skateboarding-in order to get the skaters off the streets and sidewalks.”

“Shooting facilities, skeet, trap, handgun, rifle, etc...”

46. Thinking of our County Parks and Recreation Facilities, are there any additional comments for programs or facilities that should be added, removed, or improved? *75% of the survey respondents answered this question.*

Positive Comments:

"Swinson and Shevans are great facilities and well maintained, easy to access..."

"My daughter participated in volleyball last year, and love it. Please keep that sport within the county."

"Loved the beach and fall run series. I think they are awesome and a fun activity that the whole family can do. We need more family themed things like this offered in our area."

"The county does an excellent job in trying to fulfill the needs of the people in the county."

"So far I love the parks and rec...I just want more bike paths. Maybe some summer night movies for kids at the beach."

"Yes, I didn't see "Shevans Park" on the list above which is located on the corner of 16th /Shepard/Evans. We go a lot."

"Keep extending around the city and/or county, the walking path facility (MHC trail). This is a great public opportunity that is used a lot. Very enjoyable."

Added or Improved Programming:

"More sports leagues added for all age groups....toddlers to adults!"

"More sporting activities for adults, example: indoor volleyball."

"Need more for ages 40 and under."

More activities for youth so they are occupied and safe from trouble."

"Activities for couples and or small groups, adults."

"More youth group activities available."

"Intramural Sports for Adults."

"Adult Sports League that encourages local businesses and employers to have teams of employees."

"More water-related, cheaper programs, i.e. pools, water exercise programs, etc..."

"We need a lot more stuff for kids to do, there is nothing."

Comments Question 46 Continued:

"More functions at parks open to the public."

"Social activities in the park that are open to the public. Public entertainment events."

"Senior citizens bus trips."

"Fishing programs for kids."

"Opportunities for children to be outdoors/indoors in a safe and secure area."

"Handicapped activities."

Added or Improved Facilities:

"Improve animal/dog parks and more of them."

"We need more fields, lots of teams have a hard time practicing."

Also need more well marked biking/walking trails."

"More bike trails."

"We need safe and secure bicycle paths that run with as little interruption as possible throughout the county."

"Jogging paths."

"More paved walking/biking tracks that are lit at night."

"More trails in Newport area. There is a large walking area in MHC and trails in Cape Carteret but downtown Newport area is lacking."

"Public golf."

"A fitness facility on Atlantic Beach."

"Carteret County needs its own gym facility for basketball and volleyball."

"More teen oriented places to keep the kids busy and off the streets."

"Need more basketball courts."

"More basketball courts. Fort Benjamin only has one, and there are always a slew of people wanting to play."

Comments Question 46 Continued:

"Fix all soccer fields with new goals that are safe."

"More playgrounds for kids."

"Need to have newer playground equipment."

"Parking needs to be improved."

"Picnic tables with shade. Tether ball, bocce ball, stationary bikes with handles that move forward and back to exercise arms. These would be great for the aging population."

"Fishing piers."

"Public water parks. I have seen them in other areas of the country."

"WATER PARK."

"Bowling alley and skating rink in MHC."

"More things for kids to do. Nothing for them to do." (2)

"Atlantic Beach NEEDS family entertainment. Put an amusement park there. We have nothing to enjoy here that is why so many families with kids leave our wonderful county."

"Skating ring."

"Arcades, bowling, indoor park."

"It would be nice to have a place to take kids when it is raining (indoor playground or play area like what is found in a museum or aquarium)."

"Activities for kids...bowling, skating, public pool."

Added or Improved Facilities continued:

"Public Pools: Need at least 4 that are pay as you go, not monthly fees. Also need free picnic facilities with shelters as there are not enough at Fort Macon, and also need free beach access with free parking."

"We need a community indoor/outdoor swimming pool. This would be a good opportunity for our young people to get jobs as lifeguards or working at the front desk."

"Need children's pool and adult pool."

"Public Pool" (2)

Comments Question 46 Continued:

"Outdoor pool and YMCA."

"Would love to have a swimming program in western park, not somewhere else that I have to drive. Unless Carteret County could work with Cape Carteret Aquatic center to provide free swimming programs."

Beaufort/ Down East:

"Smyrna Eastern Park has a lot of potential to be a great facility but needs to be maintained and ball parks need grading improvements if they are going to be used. As a healthcare provider myself and a parent, I have assessed and applied ice to many children's knees, elbows, and hips because of the hard - concrete like surface that these children are trying to play on. Having experienced many parks and rec facilities across central and eastern NC, we have potential to have great fields at Eastern park but much improvement needs to be made to their current state. Also volleyball area needs to be improved - sand, condition of net, etc."

"Paved track at Smyrna and a community pool."

"Definitely need more bicycle lanes and or walking lanes in downeast area."

"We need a community facility that includes a gym in each community. MHC has this available to them but Beaufort and others do not. We are very limited in when the schools allow CCPR to use their facilities."

"More variety for the younger children at Freedom Park"

"Something seems to be lacking in the Beaufort Baseball program over the last several years. A lot of kids are for some reason going Down East to play baseball."

Communication/Promotion:

"Better communication of what is available."

"I know very little about our County Parks and Rec programs."

"Website is not very informative."

Comments Question 46 Continued:

Maintenance:

"None of the parks have a maintained swing for children with physical disabilities. Some parks had this type of swing in the past but it was broken and never replaced."

"Maintenance is an issue."

"Cleanliness of the grounds."

"Litter is a problem in many public parks/outdoor use areas."

Complaints:

"I understand the reason for banning smoking from indoor public places, but I am very much opposed to the laws that have banned smoking from public outdoor recreational facilities, like public parks."

"The rec center added fitness but took away game room for youth."

"All could be improved, we as a county do not do enough for our youth. Sea Shore soccer league is too expensive for a lot of our minorities and poor families. Same with upward, the cost is too high for all to participate."

Other Comments:

"There should be enough in each neighborhood."

"None." (10)

"I don't know." (2)

47. Choose one (1) age group that you would like to see more recreational programs provided for in

Carteret County: *(Check only one) 78% of the survey respondents answered this question.*

13.79%Youth (Age 12 and Under) 10.98%Young Adult (18-29) 14.72%Senior Adult (Age 55+)
47.66%Teens (Age 13-17) 12.85%Adult (Age 30-54)

48. How do you find out about recreational opportunities in Carteret County? *(Please select the top three.)*

79% of the survey respondents answered this question.

109 Facebook

11 Parks and Rec Newsletter

263 Newspaper

68 Parks and Rec Website

111 Flyer/Bulletin Board

109 Radio

276 Family and Friends

165 TV

** Number of people who selected that method of communication.*

49. Do you have concerns about the water you and your family drink, wash with, or use in your home?28.99% Yes71.01% No *(If no, skip to question 51)***50. Is your water supply from a private drinking water well?****Of the 28.99% who said they have concerns 39.95% were on a private well and 60.05% received a municipal water supply.**39.95% Yes, Private well *(Go to –50A–)* 60.05% No, Municipal water supply *(If no, skip to question 51)***Of the 39.95% who have a private well, 53.99% of them are aware that the Health Department is able to test for bacteria through the water lab.****50.A. If yes, are you aware that the Health Department has a private drinking well water lab that can test for Bacteria?** 53.99% Yes 46.01% No**51. When deciding on a restaurant or place to eat, do you take into consideration the restaurant's sanitation score?**59.82% Always31.15% Sometimes7.67% Rarely1.35% Never

Bicycle, Pedestrian, and Public Transportation

52. How do you rate the present bicycling and walking conditions in your community? *(Focus on the area where you live.)*

10.93% Excellent 34.17% Good 27.11% Fair 27.79% Poor

53. How often do you bike or walk?

17.3% Never 38.43% few times/ month 33.71% few times/week 10.56% 5+ times/ week

54. Would you bike or walk more often if more bicycle lanes, trails, sidewalks and safe roadway crossings were provided for bicyclists and pedestrians? 80.05% Yes 19.95% No

55. For what purposes do you bike or walk? *(Choose all that apply)*

	Responses
Fitness or recreation	93.89%
Social Opportunities / Community Events	18.83%
To limit automobile use	11.00%
Transportation to school	1.22%
Transportation to work	5.87%
Travel to grocery store, shopping	10.02%

Comments:

"Health reasons."

"Therapy"

"We need more bike paths."

"Enjoyment." (2)

"To walk the dog." (7)

"Go to the beach...wish there were more bike racks."

"Walk to the mailbox."

"Visit family."

"My son would ride his bike to school if there was safe crossing of Hwy 24 in Cape Carteret at White Oak Elementary."

"I enjoy both biking and walking however, I cannot take my bike to trails just to ride or areas that have sidewalks so that I can ride."

"Relieve stress."

Comments Question 55:

"I would like to bike for fitness but my road is too dangerous due to speeding autos."

"For overall health and stress management."

"It's like taking your life into your own hands when you walk or bike where I live. I live in Newport..."

"Just fresh air."

"I do not have a bicycle, but if I did, I would probably use it for recreation and to incorporate exercise into my life."

"Take grandchildren out."

"Go with the kids." (4)

"Currently it is too dangerous to ride a bike in Carteret County except for one bike path on Bridges Street."

"To avoid traffic in Emerald Isle."

56. How can transportation be improved in Carteret County? (Includes bicycle, pedestrian, and public transportation methods.)

(Rank these in order of importance, 1,2,3,4)	Rank
Increased Transportation Choices: More and safer opportunities to walk and/or bike to destinations Bike lanes, bike paths, walking paths, sidewalks	1
Increased Public Transit Options: Fixed-route bus service to destinations; Park-n-ride lots to facilitate carpooling, vanpooling, and transit service	2
Service of Special Needs: Better transportation services for poor, elderly, and disabled residents	3
Access: Better connection to employment, medical facilities, and higher education facilities	4

Demographics

The next set of questions, are general questions about you, which will only be reported as a summary of all answers given by survey participants. Your answers will remain anonymous.

57. How old are you? (Mark age category)

<u>2.25%</u> 18 - 20	<u>8.56%</u> 35 - 39	<u>15.54%</u> 55 - 59	<u>1.58%</u> 75 - 79
<u>2.03%</u> 21 - 24	<u>8.11%</u> 40 - 44	<u>10.14%</u> 60 - 64	<u>.68%</u> 80 - 84
<u>7.66%</u> 25 - 29	<u>11.49%</u> 45 - 49	<u>4.95%</u> 65 - 69	<u>0</u> 85 or older
<u>10.59%</u> 30 - 34	<u>13.74%</u> 50 - 54	<u>2.70%</u> 70 - 74	

58. Are you Male or Female? 26.86 % Male 71.56 %Female 1.58 % Prefer not to say

59. Are you of Hispanic, Latino, or Spanish origin or decent?

97.48%No, not Spanish/Hispanic/Latino
0.46% Yes, Puerto Rican
1.37% Yes, Mexican, Mexican American, Chicano
0 Yes, Cuban
.69% Yes, other Spanish/Hispanic/Latino

60. What is your race? (Please check all that apply. If other, please write in race.)

92.99% White
7.69% Black or African American
1.36% American Indian or Alaska Native
0.23% Asian Indian
0.68% Other Asian including Japanese, Chinese, Korean, Vietnamese, and Filipino/a
0.23% Pacific Islander including Native Hawaiian, Samoan, Guamanian/ Chamorro
1.13% Other race not listed here

61. What language do you normally speak at home?

99.5% English 0 Spanish .45% Other (please specify) American Sign Language and Polish

62. What is your marital status? (Mark only one)

<u>14.55%</u> Single/Never Married	<u>14.09%</u> Divorced	<u>4.32%</u> Widowed
<u>61.82%</u> Married	<u>2.50%</u> Separated	<u>2.73%</u> Unmarried partner

Demographics

63. What is the highest level of school, college, or vocational training that you have completed? *(Mark only one)*

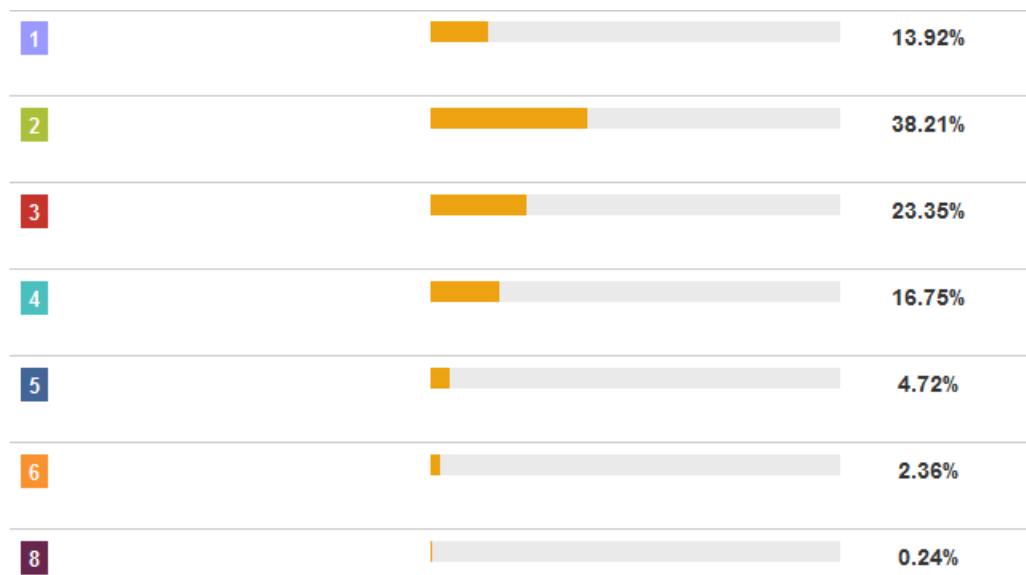
<u>.68%</u> Less than 9 th grade	<u>19.95%</u> Some college (no degree)
<u>1.81%</u> 9-12 th grade, no diploma	<u>27.44%</u> Bachelor's degree
<u>12.24%</u> High school graduate (or GED/ equivalent)	<u>21.32%</u> Graduate or professional degree
<u>16.55%</u> Associate's Degree or Vocational Training	<u>1.58%</u> Other: Currently in school

64. During the past 12 months, what was the total combined income of all members of your household before taxes? (Household refers to yourself and anyone with whom you live) *(Mark only one)*

Income	Response
Less than \$10,000	5.78%
\$10,000 to \$14,999	5.06%
\$15,000 to \$24,999	5.78%
\$25,000 to \$34,999	12.29%
\$35,000 to \$49,999	15.18%
\$50,000 to \$74,999	26.02%
\$75,000 to \$99,999	14.46%
\$100,00 or more	15.42%

65. How many people does this income support?

(If you are paying child support but your child is not living with you, this still counts as someone living on your income.)



66. Which of the following categories best describes your employment status? (Choose only one)

- | | |
|-------------------------------------------------------------|-----------------------------------------------|
| a. <u>67.72%</u> Employed, working full-time hours per week | f. <u>2.93%</u> Disabled, not able to work |
| b. <u>9.752%</u> Employed, working part-time hours per week | g. <u>1.58%</u> Student |
| c. <u>8.35%</u> Retired | h. <u>1.81%</u> Homemaker |
| d. <u>0.45%</u> Active Duty Military | i. <u>2.71%</u> Self-employed |
| e. <u>2.93%</u> Unemployed for more than 1 year | j. <u>1.81%</u> Unemployed for 1 year or less |

67. How do you view or access the internet? (Choose all that apply)

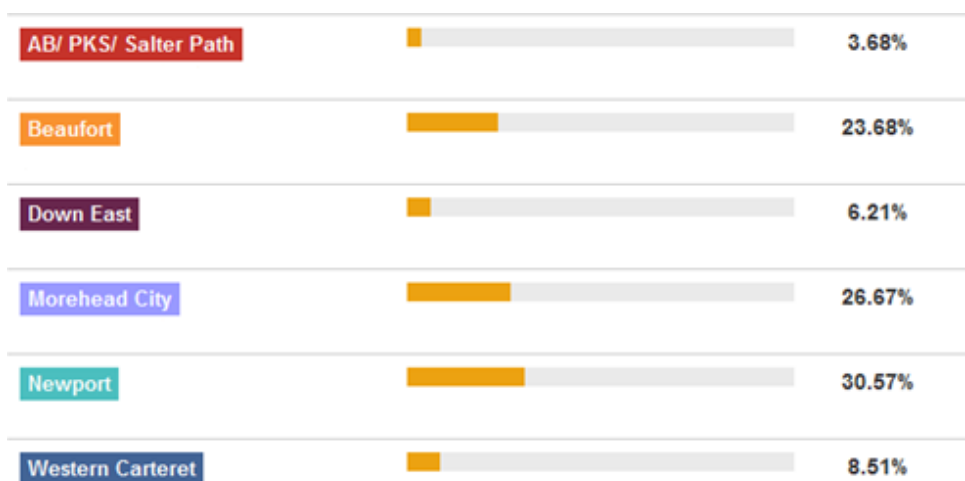
	Response
Personal computer, laptop	87.30%
Mobile device tablet, Kindle, iPad, or Smartphone	48.53%
Library computer	9.07%
Friend or Family member's computer	6.80%
N/A I do not have access to the internet	3.40%

68. Which social media website or app do you use most often? (Choose only one)

67.44% Facebook .92% Twitter 3.23% Other: Google Plus, LinkedIn, Others

28.41% N/A I don't use social media

69. In what Zip code is your home located? (Enter 5 digit Zip code)



END OF SURVEY